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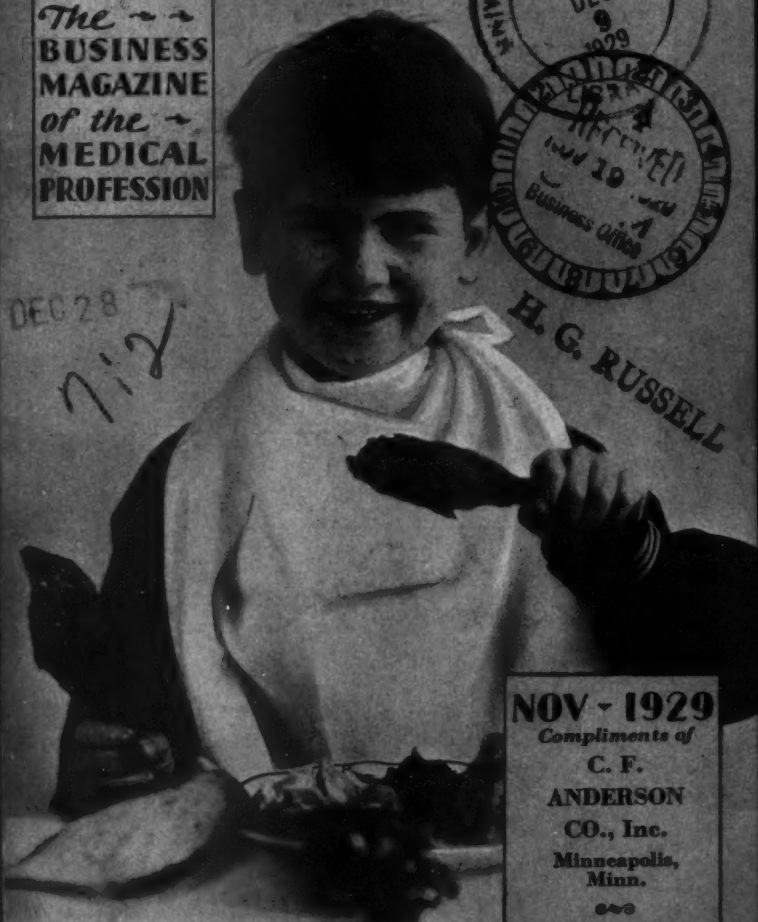
The ~ ~
**BUSINESS
MAGAZINE
of the ~
MEDICAL
PROFESSION**

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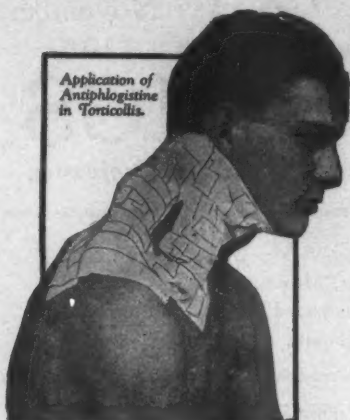
The Business Magazine of the Medical Profession

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Natural Body Defenses Are Not Interfered With

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MEDICAL November 1929 ECONOMICS

The Business Magazine of the Medical Profession

This is Volume 7, No. 2

Editorial Offices: Rutherford, N. J.

Medical "Castes" of INDIA

The East holds opportunity for the adventurous American doctor in spite of the prevalence of unauthorized medicine

By Robert J. Blackham, M. D.

Formerly Hon. Surgeon to Viceroy of India

IF we were to take a stroll down a bazaar in a main thoroughfare of Calcutta or Bombay we would not progress far before passing a modern drug store, well fitted and stocked with European and American proprietaries and drugs.

Adjacent to the drug store we should find the up-to-date consulting room of a physician, whose patients are received in a well-equipped office having all modern diagnostic appliances. The doctor may be an Edinburgh graduate, but he is at least a University Licentiate, and his treatment is as up-to-date as his surroundings. His fee, however, will be not less than the equivalent of \$2.00.

Now let us go a little farther along the bazaar. Soon we come upon a building considerably less pretentious than the drug store and physician's office we have just left, and here we are received by a diplomate of one of

the Medical Schools (the meaning of the emphasis on the word "schools" will presently be explained). His methods are less modern and his prescription is less elaborate, but his fee is just one-half that of the first practitioner; that is, not more than a dollar.

And now if we were to dive still further into the meaner streets of the city we should require the services of a guide to discover the abode of a "Hakim", which means an Adherent of the Unani—or a "Vaid", which means an Adherent of the Ayurvedic system.

This oriental medicine man you will find squatting, not in the midst of an orderly arrangement of jars and bottles, but amidst shelves untidy with bundles of roots and leaves of indigenous drugs, with earthenware pots containing unfamiliar medications on all sides.

Our "prescription" here is

given without any of the diagnostic preliminaries with which we are familiar. Probably it will take the form of some strange root or seed which has to be infused or decocted in some special way, with the fee only a few cents. These three worthies represent the three distinct types of doctor known to the public of India, where the profession of medicine is perhaps more heterogeneously represented than anywhere else on earth.

In all civilized nations some sort of definite standards of medical education are laid down either by the National Government itself or by some legally constituted body to which it deposes its authority, such as the

General Medical Council in England.

Most constitutional countries, like the States of the Union, have a State Examination which alone admits to practice, and even in Great Britain—although numerous Corporations grant qualifications or degrees—all are bound to conduct their examinations according to a prescribed standard, and to see that their students pass through a curriculum which is practically the same for all bodies.

In sharp contrast to the almost universal protection of the public from the unauthorized physician is the situation in India, where medical and surgical treatment is given by persons who



"India is a poor country and most of its teeming millions simply cannot afford to pay the prices which imported remedies and a long curriculum must command."

range from the most highly qualified and competent exponents of up-to-date methods, many of whom have held important hospital appointments in Great Britain or America, to mystics who adopt what are known as the ancient Indian systems, perpetuating methods of treatment which were already antiquated when Celsus and Galen were boys at school.

One of the most striking of

quite minor differences is in the use of the terms *Medical College* and *Medical School*.

In America and Great Britain a *Medical College* and a *Medical School* are synonymous terms, but in India a sharp line is drawn between the two.

The Indian *Medical Colleges* are situated in the great towns and connected with the various Universities. They give a full curriculum similar to that of the

"... The average peasant must either go to a hospital—which he doesn't like—or be content with a mystic who supplies him with cheap indigenous drugs."

Photo by
Ewing Galloway



leading European and American Universities.

To the students of the Indian *Colleges* the Indian Universities grant degrees which are registrable in England, and licenses to practice, which, though registrable in India, are not registrable in England.

The difference between the graduates and licentiates is that the license is granted to matriculated students, while degrees are conferred only on those who have remained one year in the Faculty of Arts and passed the first B. A. examination.

The general training in both colleges and schools, is far below British and American standards. Teaching is carried out in English, but the Indian who has been educated up to the matriculation standard is not able to absorb the teaching of medical and scientific subjects in the same way as a European or American similarly situated; he has not the same working knowledge of English. The clinical

material and teaching is poor, and it is not at present possible for a medical student to get a really *complete* medical education in India. Not one is fully prepared either in staff or equipment to give the training which can be obtained at our home institutions.

To give examples of defects, it may be pointed out that there are no special hospitals for fevers, ear, nose and throat, skin and venereal diseases, while owing to social prejudices the training in midwifery and diseases of women and children cannot be compared with that given in British and American hospitals.

The *Medical Schools* exist in various parts of the country. Their standard of education is lower, the curriculum less elaborate, and the duration of training is shorter than in the colleges.

The official *Schools* grant a State Diploma which is registrable, but there is a consideration (Turn To Page 117)



The author's office while in the Indian medical service. The figure in the center is the Assistant Surgeon.

The Doctor

By Paris Vance Corey, M. D.

A CHANGELESS friend—a faithful servant—at all times, in any emergency, under all conditions.

The first sought in trouble—the last remembered in times of prosperity.

The man whose capacity of doing good is unlimited—whose every deed and act bubbles with kindness toward his fellowmen.

Often his kindness is misunderstood—more often forgotten.

He hopes—while you despair; his heart may be full of sadness yet his face is ever smiling.

His minutes of rest are few—his hours of pleasure are less—and yet his efforts, strength and skill are never found wanting in times of need.

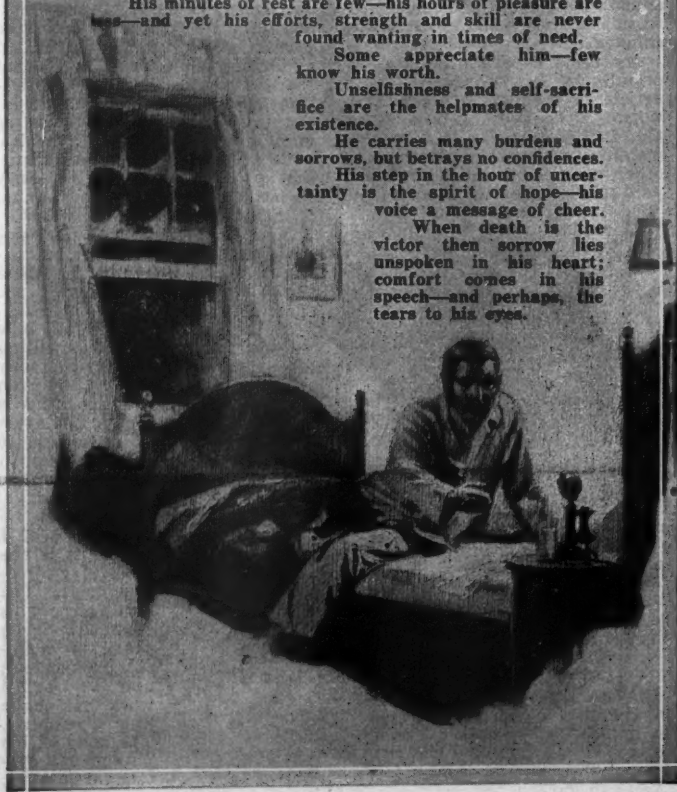
Some appreciate him—few know his worth.

Unselfishness and self-sacrifice are the helpmates of his existence.

He carries many burdens and sorrows, but betrays no confidences.

His step in the hour of uncertainty is the spirit of hope—his voice a message of cheer.

When death is the victor then sorrow lies unspoken in his heart; comfort comes in his speech—and perhaps, the tears to his eyes.



Who's Most to Blame

"I am convinced that doctors themselves are the worst enemies that the profession has"

By a City Health Officer

I AM daring, after twenty years as a general practitioner, and ten years in public health work, to add my whack to the diagnosis and treatment of this serious ailment of charity abuse with which the medical profession claims it is now sorely afflicted.

My remarks are prompted especially by Dr. George B. Lake's article in August MEDICAL ECONOMICS, "To Doctors Who Mumble 'Let George Do It'", not to mention an untold number of other articles in which free and paid clinics, health departments

and social service in general are scored roundly.

Twenty years ago I had opportunities to observe free clinics in New York and Baltimore, where free medical service was apparently worked to the limit. Yet in all my contact with the profession I heard no voice raised against them. True it is that there were not so many institutions, not so many charitable institutions, nor were there so many people, nor so many health, social, and welfare agencies urging upon the people the necessity of medical treatment and annual medical examinations.

Most important of all the family physician was not yet an "extinct bird." But none of these things will explain away the change that has taken place.

My contact with the public tells me that people are just as willing to pay for medical service today as they ever were. Yes, and even more so, because the country is more prosperous today. The average person is just as averse to accepting charity as before; in that respect human nature has not changed.

Who then, is to be blamed? I believe it is the medical profession itself. The doctor has changed! Seven years of medical, pre-medical, and interne work has made him a scientist. The body of his patient is a system of cells,



for Charity ABUSE?

"If they are to be received routinely by a standardized secretary . . .

. . . just as one patient in a row, it is just as agreeable to stand in line at the clinic."

Photos by
Underwood &
Underwood

a machine, if you please, without a soul.

The patient receives attention like my electric range. I send in a complaint to the power company, out comes an employee; he tests it out, then sends for the electrician, the voltage man, the line man, the mechanic, and half a dozen others before the trouble is corrected.

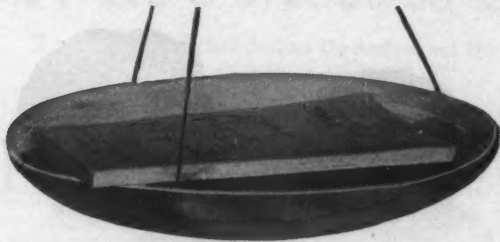
The same procedure is not at all unusual with many patients, and all too frequently all that was needed was a real heart-to-

heart talk, with a real display of personal interest, and some counsel that will change the patient's mode of living and attitude toward life.

The question then occurs; how does this affect the clinic and other agencies which are whittling at the income of the medical profession so materially? If you, my reader, will do a little psychoanalysis whereby you will arrive at the subconscious reasoning of those who patronize the free clinic (Turn to Page 95)



Is the PRESCRIPTION



Here
is a
card
to
fill
in and
mail
back

By Harold S. Stevens

THE story of the chap who went into a modern, super-service drug store bent on having a prescription filled, and was sent from the cigar counter to the cosmetic department, from there to the book section, and thence to the lunch counter, the hardware counter, the toy counter, the novelty counter, the smokers'-requisite counter, and the gift counter, until he finally ended up by locating the prescription window in a far-away corner of the basement—is too firmly based on fact to be passed over with a smile.

The average drug store is no longer a pharmacy; the chain drug store, especially, is so near to being drugless that it is time it were called by a new name.

A chormium-plated coffee urn occupies the place formerly held by the apothecary's scale as master of ceremonies. The once gently wafting aroma of drug and simples has given way to soggy vapors of ham sandwiches and tomato bouillion, and the familiar crunch of the pharmacists' pestle has been supplanted by the rhythmic churning of coffee milk shakes.

This is, perhaps, an exaggerated picture for some parts of the country; nevertheless it is

evident that a far reaching change is taking place.

We are on the upward swing of a cycle that began when all physicians dispensed their own medicine, found its middle in the physician-pharmacist relation of the era just past, and is leading us toward either one of two situations: a return to the former practice of dispensing by the physician, or the entire separation of the drug store and its prescription department into two different stores, each independent of the other.

In either case the physician is pretty vitally concerned with the results. If the trend means that the majority of physicians are going to return to the custom of dispensing their own medicines this fact should be charted in advance.

If the other alternative is to become a fact, that also should be foreseen and the transition hastened by an airing of the subject. Much can be accomplished in either case by an open discussion of the problems involved.

Looking into the future on the one hand we see a picture in which the individual practitioner is more closely than ever identified with the drug manufacturer, by reason of being his own dis-

PAD Doomed?

Then
look
for
the
answer
in
the
January
issue



penser and carrying a basic stock of pharmaceuticals in his own office. Likewise each clinic would have its own drug room even as it now has its x-ray and physiotherapy room.

We see on the other hand, with the establishment of a new type of centrally-located prescription pharmacy which will actually function *as such*, a restoration of confidence on the part of the doctor. The physician and the pharmacy will again become mutually dependent, in a measure.

To get a clear idea of just how he is concerned with the situation, the physician should ask himself these questions:

1. Am I with the majority or the minority of the profession when I prescribe?
2. If I have been resisting a tendency to discard the prescription pad in favor of my own stock of drugs, am I resisting in vain?
3. Should I accept the situation and turn to dispensing as the easiest way of solving the problem?
4. If I do undertake to do my own dispensing, what policy

should I adopt in regard to charging for medicine.

In order to get these facts every copy of **MEDICAL ECONOMICS** for this month carries a card like the one attached here.

Read over the questions on this card, and answer as many as you can. It won't take more than two minutes to do it.

You are not expected to sign the card; in fact there is no space provided for a name. You will not be identified with the information in any way.

The report of this survey will appear in the January issue, and the greater the number of replies received the more accurate will be the report.

The editorial staff is waiting with their pencils well sharpened to compile the answers; all we ask you to do is to tear the card out, give as complete an answer as possible, and mail it *promptly*.

You do not even need a postage stamp—this is a special reply card and the postage is paid for by **MEDICAL ECONOMICS**.

Do your part towards solving the question "Is the prescription pad doomed?"

Leaves from Physician's

(the first year)

January 2.

HAVE made several New Year resolutions—like the rest of the world; and one of them is to go to bed early tonight. For two nights now we've had hardly any sleep. Night before last we watched the New Year in together, and very early in the morning Bob had a call to go to old Mr. K. He was dead when Bob reached there. He was a dear old fellow, who told Bob himself that he was "living on borrowed time", since he was eighty-two years old. But making out your first death certificate is not a very propitious way to start the New Year.

Last night we went to a party, for a change, some friends of Bob's sister's, and didn't get home till way after midnight. I had a corking good time, but poor Bob was stuck with a woman who insisted on telling him about her recent operation.

Why, oh why, will people talk shop to a doctor when he is out to have a good time?

January 3.

Three people came in to pay their bills this morning; I wonder which was responsible—New Year resolutions, or Christmas bonus checks? We need the money and are glad to get it; but Bob says he wished his patients didn't have the trick of making a free office call on him when they come to pay the bill. I tell him they probably consider he is giving them a cash discount for paying within thirty days.

January 5.

Fainted this morning; I

haven't done such a thing for years. Put on my bath-robe and went out to start the coffee for breakfast. Next thing I knew I was sprawled out on the dining-room floor and Bob was holding my feet up in the air. I was furious at such an indignity, but Bob said it's the proper treatment for fainting. Then he dosed me with aromatic ammonia!

January 6.

I suppose I'll have to go see the obstetrician soon.

January 8.

Bob made application today to get on the staff of the G—Hospital. He has been handicapped without any hospital connections except the big city hospital where he interned, and of course he can't take private patients to the city hospital.

I understand the G—Hospital is a "closed corporation", but I do hope he makes it. It's tough on the doctor who is "on the outside looking in".

January 10.

Goodness, I'm thrilled! I just had to put two extra chairs into the waiting-room, there are so many people here to see Bob tonight. Practice seems to be picking up at last.

January 11.

Some excitement this morning. A strange young fellow came striding into the hall, demanding to see the doctor; so I turned Bob loose on him right away. "Were you at home, doctor, between two and three o'clock this morning?" he began. "Yes I was," admitted Bob in surprise. "Why?" "You'll find out why,"

the Diary of a WIFE ~

shouted the man, shaking his fist. "I have a sick child at home and I rang your bell again and again, but you wouldn't answer. You'll hear from my lawyer about this."

Golly, Bob was mad, and so was I; but what could we say? I remember now that when I came out into the dining-room this morning the kitchen door was shut; and we were probably sleeping so soundly that we didn't hear the muffled sound of the bell. However, the man didn't give us a chance to explain. He rushed off, to his lawyer, I suppose.

January 12.

They call what I have "morning nausea", but it seems I get it any old time of the day. Any food odor sets me going. Bob says it will wear off in a couple of weeks. I hope so, for I'm no help this way. He sees enough sickness all day long, without having to come home to a sick wife.

January 13.

Bob lost another patient today, a woman he's been taking care of all winter. Now she has pneumonia, and wants to go to the L—Hospital, because she has nobody at home to take care of her. With our lovely closed hospital system, Bob can't treat her there because he isn't on the visiting staff.

January 14.

A regular blizzard all day. The snow started during office hours last night, and I had to lend an umbrella to Mrs. P. Hope she returns that umbrella. It's the second one this month I've lent to a patient.

January 15.

Wish Bob were home! He's been tramping around in the snow all day, and had to go out again after office hours tonight, dead tired.

January 17.

Mrs. L's daughter called up today, and seemed much surprised because Bob hadn't been to see her mother at the hospital—which, by the way, is quite a distance. I felt like telling her the doctor hasn't time for social calls, but of course I didn't. I was sweet and sympathetic and hypocritical like doctors' wives have to be with patients, especially patients with so many family ramifications. "Building up a practice" calls for much study and tact. This afternoon Bob stopped at the hospital on his way home to see her, listen to her complaints, and jolly her along. It took an hour and a half of his time; he was late for his supper, and of course could charge no fee. I bet in the same amount of time the visiting doctor was able to make rounds on half a dozen patients in the hospital, and checked up a fee against each of them.

Bob was glad he went, just the same, for Mrs. L's son stopped in tonight at the office, to see how she is getting along. If Bob doesn't get a hospital connection soon, my sweet disposition will be permanently ruined.

January 18.

Not much sleep last night for either of us. Twice during the night Bob was called out after we were in bed. I watched him from the window, trudging down
(Turn to Page 43)

Financial Pitfalls

"... after such harrowing experiences I would be an idiot indeed if I did not profit by them."



A FEW months ago a very dear friend of mine who had practiced medicine for many years passed beyond this earthly sphere and left behind him many papers which I was permitted to inspect.

Among them I found a letter addressed to his children. It told, in part, of his financial mistakes; and because some of the lessons he learned are so poignant I have edited the letter for the readers of MEDICAL ECONOMICS.

It has, of course, been necessary to change certain names and places, but in the main it is quite as the doctor wrote it.

Here is the letter:

IF your lot is anything like mine, you will have as much trouble keeping money as you will have in making it. Suppose I had put \$1,000 into "safe" securities each year, beginning 20 years ago; would I be having a headache today? I have been cheated, lied to, deceived and robbed by confidence men

"friends" and odd-job crooks in general.

For example, I went into a new hotel stock-selling scheme to the amount of \$500. High-powered officials sat in conference, voted themselves huge salaries, and the plan blew up. It has been trailed through the courts for ten years with no money at all in sight as yet.

An artist, realtor and visionary helped me to make \$2,000 in putting over a building deal. This inspired confidence, so when he brought me plans for a great co-operative apartment house in Westchester, I turned over to him \$6,000. This was spent in advertising and developing plans which never matured. He "explained" everything and promised to work his head off to pay me back. His head is still on and I have not seen anything on account.

I am paying insurance premiums on his life in the amount of \$7000 with no chance of getting the principal during my life-

I've Learned ^{to} Dread!

A legacy of advice, discovered by
Wilson Irving, M. D.

time. He is hale and hearty and eats his luncheon at the Hotel Biltmore! I get a bowl of soup in Joe's—

A chap with a dangerous smile inveigled me into putting up \$500 on a lot, promising to return the money doubled within 90 days. He worked for a very prominent realtor and signed an agreement on the notepaper of that gentleman, then changed his job. I paid an attorney \$100 to keep them from suing me for the balance of about \$4500 more. The man cannot be found by a process-server.

A patient, through blandishments, sold me lots near my home which I could not resell, and meantime the carrying charges were eating me alive. He then induced me to trade the lots for "improved" property, and, apparently, arranged with the other party to add \$7000 to the value of the apartments in one case, and about \$25,000 in the other.

I have been unable to get rid of them at any price, and have

almost pawned my shirts to keep the properties alive for the past two years. If I had promptly handed over both the houses to the mortgagees after signing the contracts I would have saved many thousands. Hoping against hope I struggled manfully against an impossible situation and have been nearly crazy with worry. We are now trying to bulk all the "lemons" in one package and exchange them for something that can be sold at any price I can get in order to dig some cash out of the wreck.

I have lost courage and hope, am not going out socially as I should, am doing no creative work, and often think at odd moments of suicide—which I shall never yield to, of course, but the unhappiness is still with me.

From the above you will probably conclude that Dad was an idiot. Maybe so, but besides that I am too trusting, and do not check up on the tales that are told me by unscrupulous scoun-

(Turn to Page 85)

"In this world you are bound to take chances; everyone must take them and without taking them there would be no material progress. Good judgment must be added to good luck in order to achieve success; bad judgment and bad luck will ruin any living soul, and I have had plenty of both."



Everybody's . .



YESTERDAY is gone. Things are different. The cave man was sufficient unto himself. He killed his own food, found his own shelter, felt no sense of responsibility, and followed no moral code.

Even with the dawn of what we call civilization, governments were formed to express the will of a tyrannical few. Each nation did what was right in its own eyes. What we now call international law was no more ef-

fective than a chain of posies to hold lions.

It was just a short time ago when cooking was done in an open fireplace. Everyone wrote letters or sent messages. Book-keepers were proud of their penmanship. Bills were copied on a letter press. Each store had its cash drawer with its tinkling bell.

Roads were terrible. It took Andrew Jackson 20 days to drive from Nashville to Washington.

(We Come of Age)

.. Business

By Floyd W.
Parsons

"It is foolish to shed tears over the passing of the good, old pre-mechanistic days. We are coming of age. The speed of change will be faster—not slower."

Ten or twelve hours constituted a working shift and a dollar a day was a fair wage. Eggs were 15 cents a dozen and coffee 10 cents a pound. Men were designated as one-bottle, two-bottle, or three-bottle men, according to the amount of liquor they consumed. George Washington was a two-bottle man.

Wasp-waisted, corseted women picked their way through guttered, ill-smelling streets. Eminent citizens displayed large collections of political buttons on their vests. Bejeweled gentlemen with magnificent moustaches handed out cigars, stood for the drinks, and kissed the helpless babies. Cotton hosiery sold for 14 cents a pair, and working shoes for \$1.12.

The luxury of the old Astor House, New York's first big hotel, shocked our forefathers. Preachers warned against "that pride and grandeur which caused the fall of Rome." One writer said, "Alas for this day when families exchange comfort for costliness, fireside retirement for flirtation and flaunting, and simple healthful cozy meals for gravies and gout, dainties and dyspepsia."

Yesterday's population was huddled close to the eastern seacoast. Ships were the principal means of transport, and their arrivals and departures were determined by the mercies of God and the perils of the sea. Goods on reaching a dock were delivered

to consumers at a heavy cost. The first locomotives were called "Hell on Wheels," and the tracks they ran on were torn up several times by mobs.

Each road had a different gauge and width, making it necessary for passengers to get out at all terminals and transfer from one line to another. The first conductors supported their dignity with plug hats, frock coats, and high choker collars.

The rules of one railroad 50 years ago warned workers against whistling or any show of levity while on duty. They were told that evidence of regular attendance at church would be considered a point in their favor when the matter of promotion came up. Passengers as well as workmen were forbidden to smoke on trains or in stations.

Today a wooden railroad car is almost an oddity. Great electric locomotives pull trains more than a mile in length. Air-travel passenger time-tables are on the racks at leading hotels. The first post rider's trip between New York and Boston took three weeks. Airplanes now cover this distance in two hours. The tempo of life and industry has reached top speed. The number of pieces of special delivery mail has increased twenty-fold in 25 years.

The white-collar complex—the false barrier between office and

(Turn to Page 109)

They're All Fine Folk

Playing leap-frog at summer picnics is one of the ways in which this county society shows its spirit

By Edward K. Lawrence, M. D.

Hiawatha, Kansas

SEVERAL years ago a physician of Brown County, Kansas, lost a bet. To pay it he stood on his head, to the delight of a number of colleagues of the same county.

That incident broke the ice of conventionality of the Brown County Medical Society (which we think is probably one of the most unconventional local medical organizations in the United States).

At the present time it is not especially unusual to make a trip

down a cable trolley or indulge in a game of leap-frog as a diversion.

Brown County, Kansas, is in a farming district, has two towns of about 4000 population each and several smaller towns. For several years past the membership of the county and state societies has been more than 100% of the practicing physicians of the county.

Not only do all of the M. D. s in the county belong, but two who are taking post-graduate

"It was agreed that no doctor would attend anyone whose name was on the slow-pay list. . .

The following account, which is due for professional services rendered is hereby owed, with the North-East Kansas Physicians Protective Association, subject to the rules of said section of the Association.

M.	
PLEASE PRINT NAME	
Address	
Location	
(Ex. 253 W. 1st - 2 miles south, and 3 miles west of Hiawatha.)	
White	Occupation
Indian	
Colored	
Amount item on account	Total amount of account
MEMBER	
NORTH-EAST KANSAS	
PHYSICIANS	
PROTECTIVE ASSOCIATION	
Dr.	
Address	
Date	
Have you made further remarks on the back of this blank	

. . . until they had paid, and this has been adhered to, with exception for charity."

When You ^{Get} to Know Them

work retain their membership and four doctors from the county adjoining are on the roster. Why? Because they have good meetings and good times. We meet once each month at the office of one of the members, where papers are presented, either by members or guest speakers, and the business of the Society transacted.

The Auxiliary, whose membership is composed of the wives of most of the members, meets at the same time at the home of the same physician. When the business meeting is over all are entertained at the host physician's home with refreshments and any program they may care to provide.

At one of the summer meetings the members of both society and auxiliary have a picnic at a beautiful country resort, where those who care to do so may swim, roller-skate or just "talk shop". The usual picnic baskets are brought and all served on one big table.

It is then that the dietitian is caught letting his belt out three or four holes, after having placed two drumsticks on an already well filled plate, and the matron who has been on a reducing diet asks for "just one more piece of that wonderful dark cake of Mrs. X's and a little more of these delicious preserves Mrs. Y. brought."

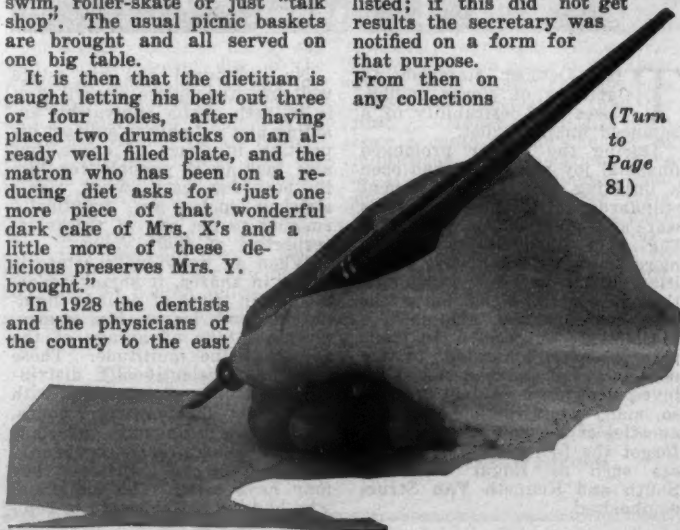
In 1928 the dentists and the physicians of the county to the east

were invited to the picnic meeting, and in 1929 the dentists were again present, as well as one of the prominent surgeons of St. Joseph, Missouri, at the July picnic.

This surgeon and his wife enjoyed the fellowship and feed so much that they entertained the society in their home at the August meeting, supplying the scientific program and serving a complete supper in their beautiful formal garden. Twelve doctors and their wives drove 42 miles each way, and four traveled a round trip of 118 miles to attend this meeting.

The members believe their services should be paid for, and for several years issued a monthly list of slow-pay debtors showing the debtor's name and the amount he owed each member. A form letter was sent each delinquent before he was listed; if this did not get results the secretary was notified on a form for that purpose. From then on any collections

(Turn
to
Page
81)



*Crowds watching the
Stock Exchange during the
panic of October 24th.*

The Doctor



THE October stampede to get out of stocks emphasizes the desirability of a balanced financial diet.

During the earlier prolonged financial joy ride, there had been a breaking down of investment standards. Old time investors were smitten with the speculative bug, and gradually turned to more and more speculative securities. Prior to a few years ago, they did not think common stocks were conservative enough for investment purposes. In time they became converted to the new gospel of common stocks for investment purposes, but, in doing so, many went further than the apostles of the new doctrine, and forgot the footnotes which authors such as Edgar Lawrence Smith and Kenneth Van Strum emphasized.

No individual has his estate well invested unless a part of it is in cash or its equivalent, enabling him not only to support his position in times of crisis, but also making it possible for him to buy for cash when panic stricken mobs are frantically rushing to get out of stocks irrespective of their value.

When an individual's estate is solely in shares, it shrinks enormously in times of panicky liquidation, and leaves him unprepared to take advantage of the follies of the multitude. Those who have scientifically distributed portfolios of securities, with short term and long term bonds, some preferred stocks, and some common shares, were hedged to meet contingencies, whatever they may have been. The individual who had his entire estate in com-

and his Investments

By Merryle Stanley Rukeyser
Financial Editor, Medical Economics

mon shares, on the other hand, was in reality taking a bull position on the market. He deprived himself to a large extent of cash or its equivalent to take advantage of the temporary interlude of emotional finance, in which millions of economic illiterates clamored furiously to sell irrespective of price the very same certificates of stock which a few months earlier they had sought to acquire in feverish excitement irrespective of price.

These interludes of emotional excitement create opportunities for analytical investors. If the physician will apply to investments, the same scientific spirit which he uses in the practice of medicine, he will prepare himself to meet emergencies in times of stress and emergency.

Before the panicky liquidation, J. R. Edwards, Cincinnati investment dealer, wrote to me to say that the investment diet of the American public has become unbalanced. The resulting liquidation constituted Exhibit A to prove the validity of his contentions. "Barron's states that the present absorption of investments is at the ratio of 80 per cent stocks and 20 per cent bonds," Mr. Edwards pointed out, "but even this does not clearly state the actual facts. Very few bonds can now be floated unless some

convertible provision is provided, or stock purchase warrants attached. Now, as convertible bonds eventually are apt to be converted into stocks, the actual ratio of absorption of investments is more nearly equal to 90 per cent in stocks and 10 per cent in bonds."

Dr. Charles Mackay, author of a memorable book called "Extraordinary Popular Delusions and the Madness of Crowds," written in 1852, comments on the occasional pathology of the collective mind. "In reading the history of nations," he wrote, "we find that, like individuals, they have their whims and their peculiarities; their seasons of excitement and recklessness, when they care not what they do. We find that whole communities suddenly fix their minds upon one object, and go mad in its pursuit; that millions of people become simultaneously impressed with one delusion, and run after it, till their attention is caught by some new folly more captivating than the first. . . . Money, again, has often been a cause of the delusion of multitudes. Sober nations have all at once become desperate gamblers, and risked almost their existence upon the turn of a piece of paper. Men, it has well been said, think in herds; it will be seen that they go mad in herds,

(Turn to Page 105)

The recent crisis in Wall Street clearly demonstrated the advisability of having a balanced financial diet. Mr. Rukeyser's article for this month discusses methods of hedging against contingencies.



Ideas for . . .

The doctor's general assistant can improve her position by putting a little brainwork and interest in her job

By Marjory Brown Griffin

ONE of the most distressing quarrels I ever saw arose from an apparently harmless bit of news related by a physician's receptionist to a friend. The friend informed a patient that Dr. "J's" office was a hotbed of gossip—and the war was on!

Many people resent having others know that they are under medical treatment, some for good and sufficient reasons, others foolishly. Every office attendant is bound to overhear conversations between her employer and patients which involve delicate situations, and for her to mention even a word of what she hears

or sees during her working hours is an unpardonable betrayal of trust placed in her by the doctor and his patients.

Therefore I say that one of the cardinal rules of the receptionist should be—*don't gossip!* There are many other rules and regulations she should have constantly in mind if she is to realize to the full the opportunities which her responsibility affords.

In fact, I know of no other position which holds so much opportunity for the ambitious, alert woman, or which may be so dull and uninteresting to the indifferent, as that of the reception-



Receptionists

ist. One may become indispensable to one's busy employer, or one may remain merely "another girl" depending upon the interest one has in the work.

The type of office I have in mind is that of a general practitioner, through which pass many and sundry cases, and in which the receptionist must be several different people, all in one. She must be secretary, hostess, and housekeeper—and if she is truly absorbed in her work she will be more!

It does not take long to learn the names of instruments commonly used in the treatment room and how to care for them, and after one learns not to be "squeamish" at the sight of blood or lacerations, it is easy enough to offer another pair of willing hands when the necessity arises.

Many of the girls whom I know to be average receptionists are perfectly content to occupy any or all of their spare moments with light fiction or magazines. This is no fault in itself, but merely a confession of a lost opportunity. How easy to read and how profitable are the monthly copies of the A.M.A. Journal, S. G. & O., and many other standard medical magazines. Some of the articles are "over our heads" of course, and were never intended to be digested by the laity, but there is always a medical dictionary to refer to if one wants to ferret an article out.

Surgical supply catalogues can teach us the names of instruments and bandages, splints and braces. With observation we can

(Turn to Page 59)



Washington's "New Shapes ⁱⁿ the Sky"

Skepticism greeted the first physician-managed building in the District of Columbia, but the second was 98 p. c. rented before completion

By Lee Paschall

THE day when every city of 50,000 population or over will have its Medical Arts or Medical Science Building, occupied entirely by the medical, surgical, and allied professions, is not far off. In cities where the professional men are now housed, to a great extent, in one or more office buildings, designed particularly for their use, this plan has proven not only to be more economical, but conducive to a greater service to the public.

The grouping of physicians and dentists is not a new thing. It

has been arrived at gradually, as far as their grouping under a single roof is concerned, but each successive step has been the result of the growing realization on the part of the professional men that it was to their advantage.
(Turn to Page 69)

At the top of the page is a photograph of the new Columbia Medical Building, owned and managed exclusively by physicians. On the opposite page is one of the consultation rooms.



<p>TERMS OF CREDIT: All Accounts due the 10th of following month. If paid on or before 10th OF MONTH Your check should be for \$... 20.00 In which case Discount will be \$... 4.00 Unless paid by 10th of month GROSS AMT. DUE will be \$... 24.00</p>	<p>TELEPHONES CINCINNATI: AYON 4025 IF NO ANSWER CALL AYON 5707 WILMINGTON 2071 IF NO ANSWER CALL 2045</p>
<p>July 31 1928</p>	
<p>Mr. Robert Jones, 1751 Sycamore Street, Cincinnati, Ohio.</p>	
<p>TO J. B. H. WARING, M. D., DR.</p>	
<p>118 1/2 NORTH SOUTH ST. WILMINGTON, OHIO.</p>	<p>7 EAST McMILLAN ST. CINCINNATI, OHIO.</p>
<p>ITEMS OF ACCOUNT CAN BE SEEN AT THE OFFICE</p>	
<p>FOR PROFESSIONAL SERVICES RENDERED</p>	<p>\$ 24.00</p>
<p>PAID ON ACCOUNT</p>	<p>\$</p>
<p>BALANCE DUE</p>	<p>\$</p>
<p>RECEIVED PAYMENT</p>	

Collection "ITCH"!

What are we going to do—find a remedy or just keep on scratching?

By J. B. H. Waring, M. D.

Cincinnati, Ohio

IT has been said that every dog just naturally has fleas; otherwise, in polite canine circles, he isn't considered a regular dog.

Or to put it another way, Pulex Irritans must be considered part of the "dog's life" he leads.

Similarly, just about every M. D. in active practice has "Collections," which activate and irritate him just as urgently as Mr. Pulex gets under the cuticle of Man's Best Friend.

Good, Bad and Indifferent—that is about the way we classify professionally before the Public; and our Collections loom up in just about the same proportions. The doctor who is a good business man has a minimum of collection troubles; the doctor who is an indifferent business man has an indifferent lot of collection

troubles; and the poor business man doctor just naturally leads a "dog's life" on collections.

Some of our collection troubles are due to the inherent nature of medical practice. Very few doctors can run their practice on a strictly "Cash and Carry" basis; and any business run on a credit basis will have credit losses.

Because we must conduct part of our practice on a credit basis, however, is no reason at all why we should not strive to reduce our credit losses to a minimum.

We doctors are to blame for a good deal of our collection troubles; we simply haven't the backbone to conduct our practice along sound business lines. There must be something about the Practice of Medicine which confers an inferiority complex on a
(Turn to Page 37)



Symptomatic relief in 5 minutes

THE symptoms of common cold—congestion, discharge and obstructed breathing—are frequently distressing. From the patient's point of view, they constitute the essence of the annoyance from which he is seeking immediate relief.

Rapidity of action is characteristic of Mistol. Consisting of menthol, camphor, eucalyptol, and chlorbutanol in a light oily solution that spreads promptly to all parts of the nasal mucosa, it relieves congestion, reduces discharge and clears the nasal passages within five minutes.

This symptomatic improvement also benefits the pathological state and tends to shorten the duration of the

cold. Venous stasis in the mucous membrane is corrected, hyperemia diminished, and over-activity of the secreting glands checked. Repeated instillations of Mistol promote a more rapid return to normal conditions within the nares.

The formula of Mistol is the result of long and careful research, suggested primarily by prescriptions used for many years by leading rhinologists.

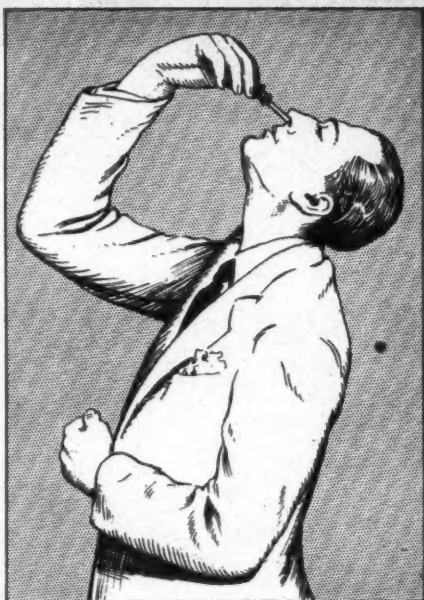
Mistol

REG. U.S. PAT. OFF.

MADE BY THE MAKERS OF NUJOL

Note: This advertisement was written by a registered physician.

© 1929 Stanco Inc.



Continued
from
Page 31.

New Shapes in the Sky

These are views of the
Washington Medical
Building, the
physician - con-
ducted project at
Washington, D.C.



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This is the Season For -

BAUME BENGUÉ

ANALGÉSIQUE

Proounced "BEN GAY"



*The Original
French Product
Now Made
in America*

ENDORSED AND PRESCRIBED BY
PHYSICIANS FOR OVER 35 YEARS

*Always keep a tube in your "kit-bag".
"Ben-Gay" is a preparation of
proven dependability*

THOS. LEEMING & CO., Inc.
101 West 31st Street, New York City

I shall be pleased to receive gratis, triple samples of "BEN-GAY", the
original French Analgesic Balm.

..... M. D.





great many physicians, especially on this "Laborer worthy of his Hire" proposition.

If we ask cash payment for our services, we are afraid our grateful patient will be insulted. If we ask compensation in proportion to the value of services rendered, we are in mortal fear our patient will think us "high-priced" and go to a cheaper doctor around the corner.

And we do have cheap doctors in the profession, just as we have high priced ones. The difference is that the high-priced ones derive the cream of the clientele, prestige, etc., while the cheap doctor gets what is left. Likewise, we are afraid our patients will be offended if we send them a "dun" for services rendered, and now past due.

If we don't pay promptly, however, our landlord, and the telephone man and the electric light man, and all the throng of tradespeople, won't be backward about a personally-conducted dunning expedition headed our way. And they get the money *due*. Never worry about that. Somehow or other, the harassed M. D. *pays* and *pays* and *pays*. If only a few of his grateful patients would pay a little now and then, this pay-extraction process would not be half so painful for the struggling M. D.

I have suffered, and I have fought, and I have bled over this collection business, and I am still doing more or less of the same. But thankful to say, I am doing it in a slowly lessening degree. I haven't any *sure-cure* collection remedy, and not a month goes by that some dead-beat does not get in his work, but my experiences may be worth relating.

In the first place, the M. D. must resolutely instill some real, honest-to-goodness backbone into the conduct of his medical practice. The spineless M. D. will have collection troubles the balance of his years of practice to an incurable degree. Deliver good, honest competent service, and then demand adequate compensation from all patients able to pay.

Give free service gladly to those properly entitled to charity; but do not be sure off-hand that you are dealing with a charity case. Investigate first and give charity secondly, except in case of emergency, of course. Let your patients know that you expect prompt payment for all medical services, unless mutually agreeable credit terms are arranged in advance.

The sooner an M. D. lets his public know that he expects prompt payment and adequate

(Turn to Page 63)

YOUR attention is respectfully called to this account, which, no doubt, has been overlooked. An early settlement will be greatly appreciated. A

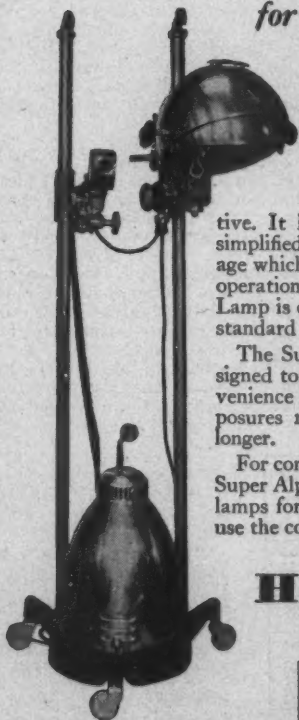
PLEASE give this account your immediate attention. It is long past due and settlement must be made without further delay. B

EVERY courtesy has been extended you regarding the payment of this long over due account. Unless paid at once, it will be placed in the usual channels for collection provided by law. C

"Here is the set of three stickers which the author found more effective than a whole book of collection letters, follow-ups and 'psychologically accurate' forms."

The SUPER Alpine Sun Lamp

*A high-intensity quartz lamp
for accurate dosage control*



HANOVIA'S latest contribution to the science of light therapy!—the new SUPER ALPINE SUN LAMP.

The ever growing use of ultra-violet ray therapy has made the development of this lamp imperative. It has increased ultra-violet intensity, simplified control, and adjustable burner voltage which allows accurate dosage control. The operation of either the Alpine or Kromayer Lamp is controlled with a lever similar to the standard automobile gear shift.

The Super Alpine Sun Lamp has been designed to afford the greatest celerity and convenience in treatments. It obtains in short exposures results which before required much longer.

For complete information regarding the new Super Alpine Sun Lamp and our various other lamps for scientific and professional use, just use the coupon.

HANOVIA LAMPS for Light Therapy

Hanovia Chemical & Mfg. Co.
Dept. C-18, Newark, N. J.

Please send me, without obligation, literature describing Hanovia Ultra-Violet Lamps.

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New York, N. Y. 30 Church Street
San Francisco Cal. 220 Phelan Bldg.

"Speaking FRANKLY"

(what the readers think)

Ethics

To the Editor:
Can one physician organize and operate a health organization single-handed, and do it successfully? Would his project be banned because of medical ethics?

In my community there are many families who are not able to pay regular fees for medical attention, especially in any long-continued illness.

There are no free clinics and no provision for free medical attention except by the County Physician.

And since I happen to hold this wonderful position in our county I am able to say frankly that it is a farce. I am absolutely under the orders of the county judge. If he says go I get paid for the trip and if he says no I must either turn the patient down or go a long distance for nothing, neither of which is very pleasant.

The majority of these people could pay small monthly dues which would entitle them to periodic examination and to care when ill.

It seems to me that this is about the only way of solving the problem. I would like to have the opinion of other readers of MEDICAL ECONOMICS about the ethics and the practicability of such a plan.

J. S.

Name

To the Editor:
In my opinion MEDICAL ECONOMICS leads the entire publishing field in being what is wanted by the class it caters to. It is 1% ahead of Printer's Ink, the advertising men's publication.

The 1% represents the difference in name. Printer's Ink would equal it if it had a better name. A friend of mine said, when I

asked him whether he read Printer's Ink, that he was not in the printing business.

Not so with MEDICAL ECONOMICS. It is exactly what its name implies. Every article in it should be read by every physician. Besides that many articles should be filed for future use. He who fails to read MEDICAL ECONOMICS does so to his own great loss. What more could one say?

C. DEEDERA, M. D.,
Tampa, Florida.

Philippines

To the Editor:
I cannot find adequate words in which to express my appreciation for your

*Send "Speaking Frankly" letters to the Editor
Medical Economics,
Rutherford, N. J.*

publication, whose teachings and information I consider a real course of home study in the economics of medicine. MEDICAL ECONOMICS should be a complement to the regular curriculum of study in every medical school.

What is happening to the medical practitioners in America is also taking place here. They are surrounded on all sides by unfair competition, both from the public and from the government. Free dispensaries, health centers, junior red cross activities, maternity houses — these play havoc in the practitioner's career. There can not be any valid objection to the activities of these institutions, if they would only

(Turn to page 43)

concerning ARGYROL and criminal substitution therefor

It has come to the attention of this Company that products other than Argyrol are being substituted when Argyrol is specified in the doctor's prescription, or asked for orally.

To defraud the medical profession and the public in this way is a criminal offense and the A. C. Barnes Company is prepared to prosecute the guilty parties.

A nation-wide investigation along systematic lines is now being conducted for the purpose of publicly exposing and prosecuting those found guilty of the substitution of other products for Argyrol when Argyrol is specified.

There is only one Argyrol: the product of the A. C. Barnes Company.

Argyrol is a registered, trade-marked name applied to a product of the A. C. Barnes Company, that differs chemically from anything on the market, as can readily be proved by simple chemical tests.

We are confident that the pharmacists of the country as a whole will applaud an action which is so intimately concerned with the maintenance of the integrity of the profession.

A. C. BARNES COMPANY
Philadelphia, Pa.

THIS STATEMENT
was published in the
November issues of the
following journals:

Drug Topics
American Druggist
Druggists' Circular

FOR THE PROTECTION
OF EVERY PHYSICIAN
*who prescribes ARGYROL
for his patients*

Practically without exception, physicians recognize the therapeutic value of Argyrol. It is one of the most generally prescribed products in the world today.

Yet instances have come to light in which other products have been surreptitiously substituted when Argyrol has been prescribed, in many cases with disastrous results to the patient.

We recognize our obligation to take immediate action toward the correction of this fraud, and the accompanying notice published to the drug trade is a step in this direction.

This notice to the drug trade is here reproduced because we consider it part of our duty to acquaint the medical profession with the means we are employing to circumvent this kind of fraud. Such criminal substitution is practiced of course only by individuals lacking in respect and appreciation of the high standards of American pharmacists.

A. C. BARNES COMPANY
Philadelphia, Pa.

Out of the hands of midwives...

OUT of the hands of midwives and into the care of trained obstetricians, labor cases began to pass in 18th century England. For William Smellie had come home from Paris where he had learned obstetrics. He settled in London in 1739.

What an uproar rose from the midwives and what a terrible squawk went out from Mrs. Nihell, the Haymarket practitioner. "A great horse godmother of a he-midwife" she called him and it didn't do him any harm at all. In spite of abuse he acquired a large practice, invented valuable instruments, trained other men to follow in his steps.

Ten years after his death a campaign for aseptic delivery was made by another British surgeon. But everyone knows how recently has been proved the necessity for asepsis and the value of antisepsis in checking infection. Only then, mortality due to infection from childbirth began to drop and "puerperal fever" became explainable.

Thanks to progress, puerperal laceration is no longer the beginning of fatal infection. Effective antiseptics are ready to the doctor's hand, antiseptics with powerful germ-killing properties. Outstanding among them is Zonite because it is non-caustic and non-poisonous. Zonite may be used with no fear of injury to tissues. Zonite is a solution of sodium hypochlorite, electrolytically prepared to insure stability. It has a phenol coefficient of over 3.00. Its chlorine content is practically constant at 9.00 to 10.00 grammes per litre. It is always ready to use and is more effective than any dilution of carbolic acid that can be safely applied to the human body.

The obstetrician finds in Zonite an agent offering positive germicidal action, an agent remarkably efficient in the presence of both serous and mucous fluids. May we send you a bottle of Zonite and professional literature? They are gratis. Write for them. Zonite Products Corporation, 250 Park Avenue, New York, N. Y.

confine them to the service of the needy sick. The lack of discrimination is the thing that is objectionable.

If things go as they are, from five to ten years hence it will be a real job for an M. D. to keep body and soul together by the practice of medicine alone. He

will have to switch over to some other activities, at least part of the time, in order to present a traditional æsculapian front.

Thank you for your disinterested efforts in fighting for the cause of the medical profession.

M. A. SUANICO, M. D.
Iloilo, P. I.

Leaves from the Diary of a Physician's Wife

(Continued from Page 19)

the street with his precious black bag. The pavements were so slippery that he had to hold on to the railings, and everything looked so lonely and deserted that I wanted to cry. But instead I wrapped myself in my bathrobe and made hot cocoa for him, for I knew he'd come back chilled to the bone.

The first time wasn't even a call—for the family doctor got there two minutes before Bob did. The second call, just around the corner, was a case that was scheduled to go into the hospital for an operation tomorrow, anyway. She was having another attack of gall-stone colic, and her own doctor wasn't available. So I guess there won't be any "repeat calls" there, either, though they paid Bob for this visit.

January 19.

Today being Sunday, Bob made rounds this morning, and came home and went to bed for the rest of the day. I stood guard over the telephone, and lied like a trooper when people wanted to talk to him. He's been going a frightful pace, day and night, and needs a good rest. Practice has picked up with a vengeance. If this cold, nasty weather keeps up, we'll be rich by spring—that is, if the doctor holds out!

He feels better tonight, after the rest; but if that old bell rings during the night, it won't be like Curfew, for it shall ring in vain.

January 22.

This morning Bob was going over the mail while waiting for patients. He has a trick of tearing up advertisements without opening them, but I guess after this he will be more careful. A patient sent a check in an envelope with the heading of some automobile agency. We are pestered with auto ads and salesman all the time; so Bob tore this one across without even opening it.

Fortunately I discovered his error while I was gathering up the torn papers. So now I have a new job—chief letter-opener.

We do get a lot of junk in the mail each day, but even advertisements may prove important and informative. I read them all over carefully, and the ones I think Bob would be interested in I put on his desk.

January 25.

A new kind of nuisance was in our waiting-room this morning—a spoiled child with a lollypop. Unfortunately the mother had to wait quite a while for the doctor, because just ahead of her was a case of boils that had to be dressed. So she just let that child run wild. Result: sticky finger marks all over the magazines, on the chairs, the window-panes, even on the floor. The cleaning woman had polished everything up beautifully yesterday, but I had to do it all over again this afternoon. Drat that kid!

The Economics

An Editorial by H. Sheridan Bakstel

WHEN I was browsing around in Washington recently I ran into some facts that I want to get off my mind in the column this month. These facts concern the drug control section of that bureau known as the Food, Drug, and Insecticide Administration, which is, in turn, part of the U. S. Department of Agriculture. In spite of a rather ponderous name they are really getting things done down there.

I called in to see my friend, Dr. J. J. Durrett, who is chief of Drug Control, my mission being to discover just what the government is doing to protect the physician from illegitimate drug preparations.

There are more economics in this subject than one might think. It is Dr. Durrett himself who says: "The successful practice of medicine is predicated upon the purity, strength and accurate labeling of the drugs employed in case of illness."

With that I heartily agree and I would also point out that such scares as the recent alarming articles about the character of anesthetic ether offered for sale in this country, do not add any to the peace of mind of an operating surgeon. To doubt the potency or purity of drugs being administered in a critical case is a serious mental hazard.

It is thus reassuring to know that the Federal Government, operating under the Food and Drug Act, is alert to this danger and is taking full precautions against unsafe ether by removing products not of pharmacopoeial quality from the market.

I can think of another reason why drug control ought to be on the doctor's list of live topics. That is the unfortunate eagerness of fraudulent nostrum manufacturers to cash in on every influenza epidemic. The last one produced more than a thousand different preparations guaranteed to cure or prevent influenza. All of which represents a serious handicap to the work of legitimate medicine at such a time, and keeps literally millions of people out of competent hands.

It is vastly to the credit of certain magazines and newspapers that they refuse to carry this nostrum advertising, but even more important is the work of the drug control section in taking action against the manufacturers.

of DRUG CONTROL

Dependence upon worthless nostrums frequently delays adequate treatment so long that the case becomes seriously complicated.

The actual teeth that enable the Department of Agriculture so effectually to guard the profession's interest rest in the well-known Food and Drug Act. Of course, the act was not intended as a specific measure to serve the interest of physicians; it does not support the theories of any particular school of medical thought, and in fact it does not even discourage self-medication as opposed to treatment by a physician. The most it does is to make sure that drug preparations are sold under labels which do not mislead. They leave the rest to the public judgment and to the doctor's influence (if he has any).

To those not familiar with the administration's work, it is a little surprising to know that drug control inspectors are constantly visiting pharmacists the country over, buying stock samples of the various drugs that physicians use. These samples go back to Washington, are checked chemically, microscopically, and pharmacologically. Products that are not what they purport to be are promptly and firmly removed from the market.

THE result of this activity is, says Dr. Durrett, that "pharmacopoeial products almost without exception conform with their label declarations of strength and purity, a condition which did not exist some years ago before the activities of the Drug Control Unit were turned in this direction."

The only hitch in the whole functioning of the Food and Drug Act is that its power does not extend to newspaper, magazine, and radio advertisement, for these can be quite as misleading as the label on a bottle. At present fraudulent representations made separately from the interstate package itself do not come within the scope of the drug control section.

Better legislation in this respect has been urged frequently; it is probably only a question of time before we have it. We should not let its absence deter us from helping to make things work as they are. This we can do by reporting instances of misbranded drugs, and products suspected of being below standard quality, to the Chief of Drug Control, Washington, D. C.

Post-Maternity Cases

Pregnancy and parturition entail a serious drain on the human organism and usually cause a depletion in the mother's calcium reserve. Calcium deficiency in these conditions often leads to rickets and poor tooth formation in the child and dental caries in the mother.

ESKAY'S NEURO PHOSPHATES

supplies calcium in the closest possible form to that in which it exists in the nervous system. It does not upset the stomach on continued use and its pleasant flavor makes it most acceptable to the expectant and nursing mother. It assists in correcting disordered nerve-cell function, improves the appetite and imparts fresh vitality and "tone" to the system.

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COMPANY

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*Manufacturers of ESKAY'S FOOD
OXO-ATE and OXO-ATE "B"*

The Oral Treatment of
ARTHRITIS
with
OXO-ATE "B"

(Calcium Ortho-Iodoxybenzoate)

The rapidly growing use of this compound by the physician and our own consequent increase in production now makes OXO-ATE "B" available to your patients at a

Greatly Reduced Price

1. OXO-ATE "B" is an efficient analgesic and usually reduces pain and swelling sufficiently to enable the patient to continue his daily work.
2. Its ingestion is seldom followed by any unpleasant reaction.
3. Small doses twice a week are more efficient than large daily doses of aspirin, salicylates, etc.
4. It can be prescribed through a local druggist, and thus obviates the disadvantages of intravenous treatment, while producing—though usually in a lesser degree—the same therapeutic effects.
5. OXO-ATE "B" has been REDUCED IN PRICE to such an extent that the patient may now obtain four weeks' treatment for approximately \$3.75 instead of \$7.00. The new price to the physician is \$3.25 per bottle.



For intravenous and rectal administration the ideal form of O-Iodoxybenzoic Acid is OXO-ATE guaranteed to be 99.1% pure Ammonium Ortho-Iodoxybenzoate.



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(Department M)*

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Philadelphia, Pa.

Established 1841

A Credit Man's . . .

By following these few precautions the physician or his secretary can do much toward eliminating the chronic delinquent

By R. A. Swink

Manager, Cincinnati Office of the Service Bureau of Ohio

ONE of the perennial problems that every physician is up against, is how to solve his "bad accounts" evil. Most of the articles on collections deal only with effective ways to get a remittance after the account is several months old, usually giving examples of letters that have proved forceful.

There is another side, however, that is worthy of much more consideration than it usually receives, and that is *prevention*. The idea that prevention is better than cure should exist at the time of the first interview between the new patient and the physician, or his secretary.

As a result of my contact with the business affairs of many doctors, I naturally have had opportunity to study at close range a number of bad-accounts lists, and I have found almost without exception that most of these cases have become delinquent through causes that might easily have been avoided, if proper care had been exercised at the start, in securing the necessary data at the patient's first visit.

For example, it is a fact that about 75 per cent of the delin-

quent accounts in the average doctor's ledger are cases whose names are either misspelled, or whose first names are not given, or for whom adequate information is not available!

Usually the delinquent patient has moved from the original address; hence when an attempt is made to trace him through the directories, the lack of definite information makes identification and location of the lost patient almost impossible.

I am convinced that easily three-fourths of the credit losses of the average doctor could be avoided if either he or his secretary (and in most cases it is the secretary's responsibility) would exercise just reasonable care in getting *complete and accurate* information about the patient at the time of the first interview with him.

Because of the importance of this aspect of the "bad accounts" problem, I have prepared this list of suggestions for the physician's secretary. By following these precautions, and supplementing them with prompt and efficient collection methods, it is possible practically to eliminate the great bulk of delinquents.

These are my suggestions:

* * *

"Obviously it requires tact on the part of the secretary to get information without antagonizing the patient. . ."

1. In taking the patient's name, be sure that the surname is correctly spelled and printed out. If such names as "Schneider", "Kraemer", "Liebenderfer", etc., have even one letter misplaced, it makes later tracing through directories almost impossible. *Printing* the name is also important because it thus

“OUNCE of Prevention”

prevents later doubts as to the actual spelling intended.
* * *

2. *Always ask for the full FIRST name as well as the middle initials of the patient.* To record a name like “Miss B. Weller”, or “J. A. Smith”, or “W. Henderson” is very unsatisfactory if these persons are later to be traced in a directory. These names should appear as “Miss Beatrice E. Weller”, “James Avery Smith” or “William G. Henderson”. In cases of names like “J. A. Smith” it is wise to take the middle name in full, inasmuch as there may be half a dozen “James A. Smith’s” in a large city.
* * *

3. *Record the OCCUPATION of the patient, or of the patient’s husband or parent, as well as the concern where employed.* An example: “Mrs. Henry J. Strong, 216 N. Franklin St., Hyde Park, City. Husband is Foundry Supt. Brown Iron & Steel Co., Norwood.”
* * *

4. *Record carefully the RESIDENCE address, and if a business address is available, record both.* The permanent residence address is the one that must always be obtained.
* * *

5. *Take extreme precautions with persons who give a room-*

ing place, or office building as their address. In all such cases, find out the permanent HOME address. Those patients who give a hotel address should be required to furnish, in addition to their home address, a local reference who has a residence address in the city. This reference’s name should be recorded on the ledger card as a part of the permanent record for that patient, and later in the day that reference should be called by phone to verify the correctness of the information given by the patient.
* * *

6. *Also take extreme precautions with patients who have no telephone at their residence address.* While the possession of a telephone is no positive guarantee of a patient’s ability or willingness to pay his bills, it is pretty generally recognized by credit managers as a very good indication of such ability, and its absence is a warning signal to investigate before extending a great deal of credit.
* * *

7. *Get detailed information on all persons who give an out-of-town address.* These cases require the same attention as that given to hotel address cases, and for the same reasons. Both types of patients should be asked to pay cash for services rendered, explaining that the difficulty of

“... if a dignified manner is cultivated, and the patient is properly handled, it is easy to get all the desired information and even make the patient like it. In fact, most patients will be favorably impressed by the thoroughness of the record.”



Why the Growing Preference for the Quartz Ultraviolet Lamp?

DURING the past year we have published a series of advertisements in which are quoted abstracts from writings of recognized international authorities, pertaining to the use of the Quartz Lamp in ultraviolet therapy.

Believing that this method of presenting facts is preferred by the profession to a mere statement of claims by ourselves as manufacturers, we continue this series herewith.

The Victor line of Mercury Arc Quartz Lamps, air-cooled and water-cooled types, includes all models required in modern practice, for general office use and for the specialized practice.

As with all other Victor equipment, these Quartz Lamps are the result of unequalled facilities for research and experimental engineering, and collaboration with specialists to the end that the most exacting requirements of present-day ultraviolet therapeutics are met.

Let us advise with you in the selection of an outfit best suited to your individual practice.

"In tuberculosis therapy, as well as in all other phototherapeutic indications, I use Quartz Light exclusively. For two reasons: First, because I agree with Rost, one of our most experienced light therapists, that the light reaction I endeavour to obtain cannot be procured as simply, rapidly, conveniently and cheaply with anything but the Quartz Light. Secondly, because at that time, I could not convince myself, either from personal experiments or from the works of others, that the biological effect of other types of light surpassed that of Quartz Light. Without laying stress on this statement, I should be more inclined to assert the contrary. This would be in complete accord with the assertion of Rost, Peemoller, Hulschinsky and others, that the Quartz Light has the advantage over other types of light, not only in the Ultraviolet domain, but also in other erythema-forming groups of rays."

—A. J. CEMACH, M. D. An extract from his article, "Ultraviolet Therapy in Oto-Rhino-Laryngology," read before the Second International Conference on Light and Heat in Medicine and Surgery, University of London, 1922.

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Physical Therapy Apparatus, Electrocardiographs, and other Specialties

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A GENERAL ELECTRIC

ORGANIZATION

keeping in touch with distant patients make it necessary to follow that rule.

* * *

8. *Always ask a new or unknown patient who referred him to the doctor, and record that person's name and address on the ledger card.* Such information is helpful later in case tracing is necessary.

* * *

Obviously, it requires tact on the part of the secretary to get this information without antagonizing the patient. The interview must be carried on quietly, without other patients overhearing the conversation. If a secretary talks loudly and asks for the information in the manner of a police officer cross-examining a

culprit, of course the patient will be offended.

But if a dignified manner is cultivated, and the patient is properly handled, it is easy to get all the desired information and even make the patient like it. In fact, most patients will be favorably impressed by the thoroughness of the record and unconsciously come to think of the doctor's services as being just that much more valuable to him.

"If he is that thorough in making his preliminary record, he is probably equally thorough in his professional treatment of my case," thinks the patient. The dead-beat patient who comes with larceny in his heart will most likely be scared away by this method, so the doctor will gain in either case.



The Lucky Endorser

Reported by Lawyer Hayward



ALBERT BENSON'LL lend me \$300, if you'll endorse my note," the patient pointed out, and the doctor, after the proper amount of urging, put his name on the back of the note, which Benson later on transferred to the Regal Bank. The bank failed, and the state bank commissioner took charge of the assets thereof.

In due time the Benson note fell due; the patient was not worth suing, and the commissioner demanded payment from the doctor.

"Did you present the note for payment and give the usual notice?" the doctor demanded.

"I did not," the commissioner admitted.

"Then that relieves me from my liability as the endorser of the note."

"It might have if the bank hadn't failed, but the usual rule about notifying the endorser does not apply to a state official who is in charge of the assets of an insolvent bank," the commissioner argued.

"We do not understand that the bank commissioner is relieved from meeting the requirements of the law in relation to the collection of paper payable to a failed bank," said the Oklahoma Supreme Court ruling in the doctor's favor.

Uricedin

STROSCHEIN

Originated in Germany 1892
Now Procurable in America

FOR THE URIC ACID DIATHESIS

A granular powder containing the Alkali Salts of Tartaric and Citric Acid and Inorganic Salts.

Samples to the Profession on Request.

BARNES CHEMICAL CO., Inc.

132 W. 31st Street,

New York

Should DOCTORS Marry?

*A question every physician's wife has probably asked herself,
but there's nothing to be done about it.*

By Florence Aird

THE woman who heard her man say to her: "I could not love thee dear so much, loved I not honor more!" got just about as much comfort out of it, I imagine, as a physician's wife gets out of her husband's gruff and hasty declaration to the same effect.

She may be persuaded that her husband loves her, but she must restrain a strong inclination to stand in the corner with her nose up in the air and howl because he has no time to demonstrate the fact, and because she knows that he must of necessity often pay more attention to his profession than to his family.

Any physician, put on the defensive, will insist that the conditions necessarily existent in a doctor's home are as hard on him as on his wife. But not so. Every man needs some woman who looks up to him, comes to him for help and advice, considers his word law and his actions perfect. But when a man is fed up with

this kind of thing all day long, what response can he give when he comes home to a woman who craves the sentiment he has endured from his patients all day long. Does he need a little petting and a little praising and a little fussing over, such as most men expect when they come home? He does not. His feminine patients, from two years old to eighty, have attended to that little matter.

Does he want to hear about his wife's headache, or how Johnny cut his hand, or to have his wife weep out her troubles on his broad shoulder? Not he! That shoulder is damp already, and he's tired of sopping up tears.

Well then, does he want to clap on his hat and take his good wife out for a pleasant evening? Not so you could notice it. He feels as if he'd been going in six different directions at once, all day; and anyway, he's expecting an important call any minute.

(Turn the Page)



"... Everything taken for granted—from their wives' love to the state of preparedness of the coal cellar for a long and chilly winter."



Quick Relief . .

That is what the patient demands when suffering from sour stomach, acid eructations after meals, and other symptoms of gastric hyperacidity.

The unusual success of BiSoDoL in clinical usage is due to the quick relief it gives in such conditions.

BiSoDoL is a balanced antacid, free from the usual objections to soda or other single alkalis.

BiSoDoL is a scientific combination of the sodium and magnesium bases with bismuth, digestives and flavorings.

In addition to its value in gastric hyperacidity, BiSoDoL is effective in the relief of cyclic vomiting and the morning sickness of pregnancy.

BiSoDoL is a prescription product, advertised solely to the medical and allied professions.

Write for sample and literature.

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BiSoDoL

The "Cure"

may sometimes prove
worse than the disease

This frequently applies where massive doses of single alkalis are used in gastro-intestinal conditions associated with hyperacidity.

By employing the carefully balanced alkalizing agent — BiSoDoL — more satisfactory results are usually obtained from lower dosage and there is less danger of setting up an alkalosis.

BiSoDoL is giving prompt relief in such conditions as "sour stomach," cyclic vomiting, the morning sickness of pregnancy and various digestive disorders associated with hyperacidity and acidosis.



For a goodly number of years I myself have been a physician's wife. I've done my share of looking on from the sidelines, cheering when the going was good and when it was not so good, coaching when coaching was wanted, and even, perhaps, when it was not so much desired; rooting when encouragement was needed, and helping to carry off the wounded when neither cheering, coaching nor rooting availed to avert disaster; even taking a subordinate part in the game when extra players were needed; and at all times keeping a canny eye on the gate receipts.

It is a great game, this medical game. Everything a means to an end, and that end the practice of their profession. Family life and preparation for a future life alike subordinated to their work. Except where their own vocation was concerned, everything taken for granted—from their wives' love to the state of preparedness of the coal cellar for a long and chilly winter!

Personally, I'm in favor of a law forbidding wives and families to physicians. With the best of intentions on a doctor's part, he simply has no time for the cares and responsibilities inseparable from married life; and with the best of intentions on his wife's part she can not but know more or less unhappiness. She is bound to feel hurt that she can have only the tag ends—few and far between—of her husband's time and companionship.

I am, I say, theoretically in favor of such a law; but Heaven

grant that it be not enacted while I am still among those present.

There is no remedy for things as they are that I know of. As long as a physician is in practice he will subordinate everything to his work; and having made a habit of this in the things wherein it is a virtue, he will keep on where the practice is neither necessary nor commendable. New Year's resolutions will help, but as is the way of New Year's resolutions, only for a while.

And the physician's wife, when Time has taught her patience and a lenient philosophy, will go cheerfully about the business of life her motto:

"For every evil under the sun,

There is a remedy or there is none;

If there be one, try to find it;

If there be none, never mind it."

It is a hard enough situation we have got ourselves into, but I don't know of anything we can do about it, do you?

About Our Cover

A reader has written to inquire why the name "Ewing Galloway" appeared on the cover of October MEDICAL ECONOMICS; the statue represented on the cover, he says, is the work of a Boston sculptor, Leonard Craske. In explanation: the name "Ewing Galloway" did not refer to the sculptor but is a credit line inserted as a courtesy to the photographer who took the picture.

FOR INSOMNIA

An ideal agent, for the rest it produces is refreshing and is not followed by depression or other disagreeable after-effects.

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With a minimum dosage a full sedative influence is exerted.

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Made of

Tempered Glass

is so tough and hard that it resists breakage to a remarkable degree. It has a long, easy reading scale, is easy to shake back the mercury column and registers accurately. Made in accordance with the new U. S. Standard Specification.

Now available in Three Types of Cases

The Fack-ne Twin:

No. 178. Polished Hard Rubber, \$5.00 each. Alcohol can be used as sterilizing agent.

No. 177. Red Pyralin with black ends, \$4.00 each.

The Fack-ne Single:

No. 174. Three Colors — Black Hard Rubber, Chinese Red, Imperial Yellow, \$2.00 each.

Unequaled as a Christmas Gift for Doctors and Nurses

FAICHNEY INSTRUMENT CORPORATION

Watertown, N. Y.



A Suggestion for Philanthropists

Research for improved medical service, and not wholesaling of
present-day treatment, should be charity's real aim

By J. Lewis Webb, M. D.

A GROUP of wealthy laymen and less wealthy social-minded individuals have, it seems, an evil penchant for projecting themselves into the field of medicine. Often they are abetted by members of the profession. In every discussion of medical economics someone is sure to make the assertion that these philanthropists and the charity movement they finance are so wealthy and so energetic that it is useless to try to curb them.

It is nevertheless true that the activities and ambitions of this group have seriously threatened the future development of the highest type of medical service. Yet these laymen, guided by their professional advisors, have acted upon the best information they had. It is our own fault if they have lacked reliable information to guide them differently.

The following paragraphs are offered by way of suggesting how the present antagonism may be reduced, and a spirit of cooperation induced.

Almost within the memory of the present generation began the era that has brought improved service in so many branches of civilization. Electricity, rapid transportation, comfortable housing, good food—these were once either scientific novelties or luxurious playthings. They were neither developed to any considerable degree of efficiency, nor regarded as sources for profit.

But as soon as men grasped the idea that they were possibi-

ties for popularization and that efficiency could be made profitable, the masses were able to secure the benefit from these developments.

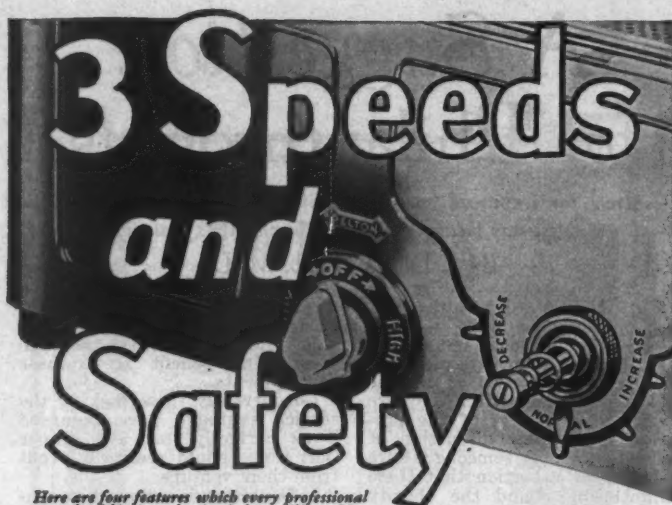
Concurrently those making the service available have regarded it as perfectly just and proper that they should realize a profit from their venture.

It is almost an axiom that continued development and service rest upon the fact that profits are to be made.

*"The great day of
medicine is ahead;
every physician dreams
of a medical service to
come that will entirely
eclipse what is available
today."*

There are indications, incidentally, that physicians and others now realize the dangers of socialized medicine, and so today enough study is being given to medical economics to assure us that in America we are to see medicine developed to a service as efficient and satisfactory as are the other commodities enjoyed by our people.

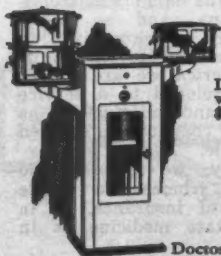
Apparently, we have turned away from schemes to saddle some form of insurance, as in Germany, state medicine as in



Here are four features which every professional man should insist on having in his sterilizer—You will find them developed to the highest degree in—

PELTON STERILIZERS

Three Speeds and Safety, all serving a distinct purpose and each designed to operate with almost human intelligence—important features, since they cut down time and overhead, thereby saving money . . . 1. High Speed with quick boiling from a cold start . . . 2. Medium Speed maintaining vigorous boiling with half the current used on high . . . 3. Low Speed, the steady, all-day-boiling speed—at minimum cost . . . You can forget your Pelton Sterilizer at any speed—put it completely out of mind and the Pelton Control, entirely separate from the Speed Switch, will positively disconnect the current at the proper moment . . . In addition long life and freedom from escaping steam are assured by the one-piece boiler construction, with no seams, solder or rivets to loosen and tie up your equipment.



For years Pelton Sterilizers have served the great majority of the medical men in this hemisphere and now better than ever we are ready to serve you. Ask us for the complete story—the information will be invaluable.

Lincoln Model Series 12
with 11-inch Sterilizers
\$140; 16-inch \$157.

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For complete data send the coupon below.

Doctor _____

Address _____

Russia, or panel system as in England, upon our own country, to the damage of the public and the pauperization of our profession.

Research is recognized as an important part of every progressive industry. Telephone companies, the radio, fuel, food, and other industries are busily at work trying to discover or invent new features connected with their product or service. The American public would not tolerate an industry that neglected this part of its activities, that was not on its toes seeking improvement. But this research work uses up capital and hence must be all charged back to the public eventually.

In the past inventors and research workers were starved recluses. They may have been romantic, but humanity delayed its own comfort because it did not encourage them. Today, on the contrary, industry hunts out the most promising men and urges them to work in their respective fields of research. Then when discoveries are made they become the property of the industry, and as soon as practical, they are incorporated in the product, in order that the public may become the recipient of improved service.

To turn the same reasoning to medicine, every physician can name several discoveries that are very sorely needed in our own field. Probably we realize these needs even more acutely than does the layman. And knowing the deficiencies of medicine only too well, physicians are reluctant to go before the public and parade present-day treatments and service as being perfect. The terrible contrast here is that lay groups who are only partly informed rush about enforcing wholesale maternity work, child welfare, and cancer treatment,

as if these had been perfected and as if universal application of present day knowledge would remedy all human ills.

To permit lay groups to succeed in their mission of educating the public toward this belief, to allow the enforcement of any sort of present-day treatment to become a part of our government policy would stop all medical progress.

Physicians have been criticized for their resistance to the government maternity laws and the social hygiene laws, on the foundation that this opposition was induced only because such activities threatened to reduce the doctor's practice. The greatest reason, however, that physicians opposed these movements was because they would stop research and development.

The great day of medicine is ahead; every physician dreams of a medical service to come that will entirely eclipse what is available today. Nothing must be allowed to prevent progress toward this end.

Practicing physicians are today conscientiously applying the most approved measures for the relief of the patient seeking their service.

No patient employs a physician to experiment upon him while he is sick; he comes for relief and cure. The sick man of today is receiving the benefit of research and discoveries of the days gone by.

He does not receive any benefits from the research underway today; hence there is no reason why he should be charged with the cost of such research, when the patient of next year, or of ten years from now, is the one to receive the benefit. Obviously then the practicing physician is not the man to conduct the work of re-

Try BROMO ADONIS in Diseases of the Nervous System

- ☐ Bromo Adonis No. 1 is effectively prescribed for many nervous diseases, as a general nerve sedative, and for Petit Mal Epilepsy.
- ☐ Bromo Adonis No. 2 is used with lasting results in obstinate cases of Epilepsy and where a potent sedative is indicated.

Check the preparation desired, for free sample.

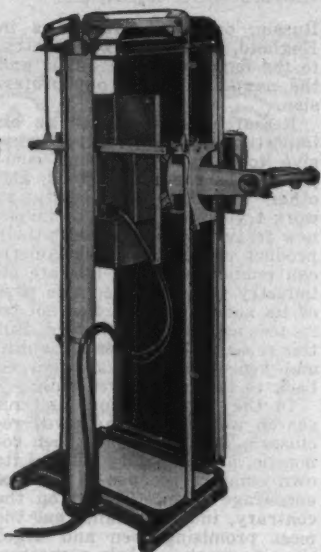
TUCKER PHARMACAL COMPANY (11) 189 Duane Street, New York, N. Y.

Wappler SHOCK-PROOF Fluoroscopic Units

ONE of the most important improvements ever made in X-Ray Apparatus is embodied in these new Wappler Fluoroscopic Units, which insure to both patient and operator absolute safety from high tension shocks.

The standard radiator-type X-Ray tube is enclosed in a lead-lined protective chamber, mounted between the halves of the transformer. There are no high tension leads, therefore no possibility of shock.

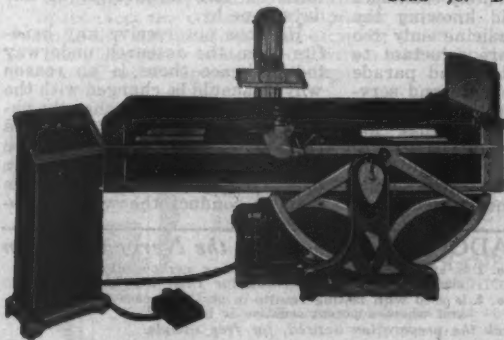
Equally important is the fact that anyone can change the tube easily in a few minutes. The tube is not immersed in oil, therefore should it become necessary to change it, the operator is not deprived of the use of his apparatus while he waits for



an expert to come from the factory.

This important improvement is embodied in three new Wappler models: The Vertical Fluoroscope, the Horizontal Fluoroscope and the Motor-Driven Universal Fluoroscopic Table.

Send for Bulletin 16-SP, fully illustrating and describing these latest type Fluoroscopic Units.



**WAPPLER
ELECTRIC
COMPANY,
Inc.**

General Offices and
Factory:
Long Island City,
N. Y.

Show Rooms:
173 East 87th Street
New York City

search necessary to future strides in medical progress.

In fact, even if this work were not to interfere with the daily tasks from which he derives his income, he would still lack the funds necessary to any real research. To depend upon him for the needed discoveries in medical science means that society will be deprived of them for a long time to come.

Under the present system (or lack of system) new appliances and remedies are usually introduced by manufacturing concerns, whose products physicians must use experimentally. Products introduced to the profession are often experimented with by individual physicians for a few years, and then being found lacking, are discarded. The public pays the bill and the manufacturer sometimes reaps a harvest from an insufficient product. This system is not worthy of permanent inclusion in the scheme of medical progress.

With all this eliminated, how then is society to get the benefit of research and improved medical service? It can be done in several ways. The medical profession might finance and operate research just as industry does, and then it would have the right to charge expense and profits to the later "customers". The public might, by taxation, support institutions for research, in which case no one will be entitled to profit from eventual inventions

or discoveries. However, nearly all experience with politically controlled institutions leads one seriously to doubt the advisability of putting this plan into practice.

Lastly, philanthropists might go further than they have and make their gifts real philanthropies by financing work of this kind. It would then be within their power to forego profit. Admittedly, such institutions and activities do not lend themselves to self-aggrandizement, or to being made monumental memorials, as does the financing of a hospital, clinic, or museum.

I believe that there is a very distinct line of demarcation between research and the treating of disease. The plan of building hospitals and clinics indiscriminately to render wholesale routine treatment is not a part of true research.

To take up another angle of this question, medical schools have long been surrounded with a halo. In some instances this feeling may have been instigated by members of the faculty as a means of increasing their own prestige. In other instances there probably existed a desire to make the schools appeal as strongly as possible in order that they might receive the benefactions of wealthy donors.

Now, a medical school has a very distinct purpose. Members of the faculty should be chosen
(Turn to Page 136)



Ideas for Receptionists

Cont. from Page 29

learn what brands of supplies our doctor prefers, and see to it that there are plenty on hand.

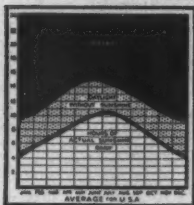
We must be, too, a "guardian of the outer door", so to speak, and protect our doctors from all petty nuisances which take up his

time and are unprofitable. The stream of agents—real estate, book, bond and what not, seem endless. Then there are telephone messages which can be handled without his attention, insurance reports, (droves of them) which

ALL THE RAYS OF
SUMMER
Sunshine
IN THEIR NATURAL PROPORTIONS



*Sun-heightened health—even in winter, from the new
Table Model*



*Chart of sunshine in
United States*

EVEREADY (carbon-arc) Sunshine is safe because it is so natural—so close to natural sunshine in light-ray content.

You can safely prescribe the use of **Eveready Sunshine Lamps** in the homes of your patients because these lamps give light that duplicates the health rays of summer sunshine.

Eveready Sunshine Lamps, burning **Eveready Sunshine Carbons**, give the same health rays that are found in summer sunshine—give all the rays—in essentially the same proportions!

The lamps are especially designed for the home. They are strong, sturdy and

*Sunshine helps to build health. For many months of the year sunshine is scarce. The **Eveready Sunshine Lamp**, burning **Eveready Sunshine Carbons** or the new **Super-Tan Carbons**, makes up for the lack of health rays in winter sunshine, by reproducing its health-giving rays in the home.*



*The famous Floor Model **Eveready Sunshine Lamp** has brought summertime joy to thousands of families*

absolutely shock-proof. The Council on Physical Therapy of the A. M. A. has accepted our policy of selling **Eveready Sunshine Lamps** and **Carbons** to the public. **NATIONAL CARBON COMPANY, Inc.**
Carbon Sales Division: Cleveland, Ohio

Unit of **UCC** and Carbon Corporation
Union Carbide

EVEREADY
TRADE MARK REG
Sunshine Lamp

can be promptly done if one will remember to get the proper information from the patient when he comes for treatment.

And now, speaking as one receptionist to another, it seems to me that the keynote of all this is, "Be alert!" Don't slump. It is easy to slump when one sits many hours at a desk answering a telephone or typing letters, but the pleasant voice, the thoughtful consideration, is light in a patient's dark day and is often the cause of their returning for sympathy and understanding, and sending friends and relatives as well.

Be saving. Save on stationery, for engraved letter heads are expensive. Save on laundry. One can use a fresh towel every minute, it seems, unless some sort of check is kept on them. Laundry bills are a big item in the office. One cannot be stingy with these things, of course, but a great deal of waste is possible.

Keep cheerful. Hang up your troubles with your hat each day, and live for your work. It is a hard thing to do, but it is imperative. There is no place in a doctor's office for one's personal illnesses, either of body or soul.

I know a receptionist who has a little trick of telephoning her friends while the doctor is away. Don't do it. The doctor's phone is a busy one. If a patient can not reach you, he will quite likely reach someone else.

Learn to be calm in a crisis. It can be done. Though one's knees may feel like a pair of castanets

when a child is brought in off the street, mangled, perhaps dying, it is possible to say calmly, "I will get the doctor at once," and proceed to do so.

Get your patient on the table, make him as comfortable as possible with as little motion as you can, start your sterilizer and have at hand any instruments or material which you think the doctor will require. And keep steady.

Be dependable. If the doctor asks you to get out a report for him, to write a letter or telephone a message, do it at once. Let him know that he can depend upon you.

Keep your office immaculate. We are not asked to do any heavy cleaning it is true, but we must dust every day, keep our magazines in order and change them often, clip the stems of the flowers and give them fresh water, as well as our other little duties in the treatment room.

Be careful of your appearance. It matters a great deal how you look. I prefer to see a uniform, and white, low-heeled shoes. They are in good taste and leave a good impression upon the patient. If the gown is to be white, then see to it that it is white. There is no excuse for a dirty uniform.

Most general practitioners do not employ a trained nurse, but prefer to do with a general assistant. It is to these young women this article is directed.

Try, then to see new possibilities in your position. Perhaps—who can tell?—the reward may be greater than the effort!

For effective results in the treatment of tenacious COUGHS, COLDS and for BRONCHITIS and LA GRIPPE prescribe

R. ANGIER'S EMULSION

Two teaspoonfuls taken consistently every two or three hours, preferably undiluted and churned about the mouth before swallowing.

During the acute stage, smaller and more frequent doses (1 teaspoonful every hour) brings quicker relief.

Its pleasing palatability together with its soothing and expectorant effects, without the necessity of narcotics, warrants its use in your practice.

Trial bottles for the asking.

ANGIER—BOSTON 34



Protection against Rust

Now, you can lengthen the life of your instruments by preventing rust during sterilization, by keeping them sharp and sterile without danger of corrosion.

It is really simple, Sklar's STER-TABS make it possible. Add two STER-TABS to each quart of water in your sterilizer and your instruments will be impervious to rust or any foreign substances in the water.

The low cost of STER-TABS is quickly repaid in the dollars they save. You make your present instruments last longer, and you have quicker sterilization with lower current cost.

Buy them from your Surgical Supply Dealer

Ask for Sklar's STER-TABS—accept no substitute.

PRICE	
Bottle of 100.....	\$.75
Bottle of 500.....	\$3.25
Bottle of 1000.....	\$6.00

J. SKLAR MFG. CO.

(Wholesale Exclusively)

133 Floyd Street
Brooklyn, N. Y.



Want To Eliminate Faulty Syringe-Needle Operation?

If you are the doctor experiencing any of the following difficulties in your general hypo work:

- Leakage at syringe tip and needle mount.
- Jerky, unreliable syringe operation.
- Clogging or corroding of needles.

the VIM Unit, pictured here, is one sure way of eliminating your troubles.

The reason is simple. VIM Emerald Syringe tips and VIM Stainless Steel Needle mounts are made to fit each other with snug, micrometer tightness. When used together as one unit leakage is minimized and complaints eliminated.

VIM Needles are made of genuine Firth Stainless Steel. They will not rust or corrode. VIM Emerald Syringes are made from a non-soluble, emerald color glass which is exclusive with MacGregor and used only in VIM Syringes. The keen, rustless qualities of the VIM Stainless Steel Needle perfectly complement the tight, velvet-smooth operation of the VIM Emerald Syringe.



Specify VIM Units

Specify VIM Units at your dealers. VIM Emerald Syringes are always known by their characteristic emerald color. VIM Stainless Steel Needles by their distinctive square mounts marked "VIM" for your protection.

Order from your dealer, or tear out this ad and request him to send you a VIM Hypo Unit as described. A trial will convert you to constant use of VIM units.

MacGregor Instrument Co.
Needham, Mass.

Collection "Itch" . . .

Cont. from Page 37

payment for services rendered, the sooner he is going to have surcease from collection troubles.

If your practice will permit you to do so, by all means install a good, energetic, competent office secretary. Have her handle all financial transactions of your practice. She should not be too young, and not too old. She should be neat, competent and pleasant, but not too good-looking; and above all things not of the flapper type either in dress or in actions. If she is too attractive, it means that many younger and sometimes older male patients will want to take up her time with office flirtations.

That sort of thing is not good for office decorum and its capacity for increasing the number of patients and visits is not exactly what I could recommend as a practice-builder. There is too much dynamite in the idea. Besides, the employer himself should not have anything around that

might distract him from his work.

The office secretary should not, however, be too plain. A happy medium is what we should strive for in appearance, dress and actions. She should handle all accounts, prepare and send out monthly statements, and keep in close touch with delinquents. An efficient office secretary is worth her weight in gold, if your practice is such that one can be employed to advantage.

Assume, however, that conditions are such that the doctor must be his own office secretary and bookkeeper.

My own practice is limited to eye, ear, nose and throat and electro-surgery. Practically 99% of it is office practice. I discourage all outside calls, except for consultations, by referring such calls to general practitioners or specialists in the various lines, and by raising the fee for such outside calls to a degree where



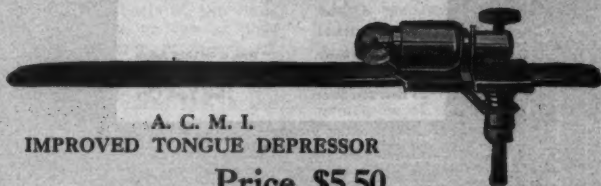
THE AMERICAN CYSTOSCOPE MAKERS, INC.

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454 WHITLOCK AVENUE, NEW YORK, N. Y.

Manufacturers of Cystoscopes and Allied

Diagnostic Instruments Since 1908



A. C. M. I.
IMPROVED TONGUE DEPRESSOR

Price \$5.50

Simple — Safe — Sterile
Fits any A. C. M. I. BATTERY HANDLE

AMERICAN CYSTOSCOPE MAKERS, Inc.
454 Whitlock Avenue, New York.

Enclosed find \$5.50 for which please send me one A. C. M. I.
Improved Tongue Depressor with wooden blades and lamp.

Dr. _____

Address _____

Doc'ter's Name _____

STAINLESS Steel Surgeon's Needles

INTESTINAL NEEDLES By Circle Taper Point



SURGEON'S NEEDLES By Circle Cutting Edge



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Rustless?

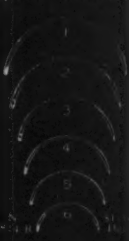
Of course Anchor Needles are rust-proof, tarnish-proof, heat, moisture and acid-proof.

But what is even more important,
Anchor Needles are the toughest, sharpest, safest needles you ever used. They are guaranteed never to bend or break in use. They are dependable in all emergencies.

Anchor Needles are inexpensive. Note the low price. Order some for a trial today.



CATGUT NEEDLES By Circle Round Point



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Your Dealer has them Write us for FREE Sample
S. DONIGER & CO., Inc.
23 East 21st Street New York City

STRAIGHT ABDOMINAL NEEDLES By Circle Triangle Cutting Point



ST NEEDLES



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patients will come to the office if able to do so. My fees are purposely kept higher, because of a desire to develop a high-class clientele. Charity cases, of course, are treated gladly as such, but those unable to pay our customary fees, are tactfully referred elsewhere.

It has been the policy not to bother with the slow pays and the poor pays, and above all, with the dead-beat.

Regular office hours are kept, and I do not come to the office outside of regular office hours except in cases of emergency. Then the charge made is the same for a house call, and a sign to that effect is prominently displayed in the entrance hall. The same applies to Sundays and holidays.

It works like a charm in keeping office hours "regular." Night calls are invariably doubled, and it is surprising how night calls dwindle on that policy, whether in general or in special practice. It takes Backbone to stick with it, but in the long run it pays handsome dividends in sufficient sleep and recreation. A fagged-out M. D. is an inefficient M. D.

I do no practice at my home. This proposition of combined residence and office may be all right for the M. D. who likes it, but the little added overhead of a separate office is far better in every way. Telephone calls at the residence are handled as far as possible through other members of the family. When the physician is at home, he should leave the office and all its cares far in the wake.

To get back to collections:

When the patient enters the consultation room and is seated, he is very likely to see a neatly framed sign placed on the opposite wall where it will do the most good. It is in plain block letters in black on a white background, neatly framed.

"OFFICE PRACTICE CASH."
—that is all it says, but it is an eye-ful, and they all see it. Some will criticize such a sign as commercial.

(Turn the Page)

A Shoe which definitely assists your treatments

MEDICAL practice generally concedes that it is often difficult to obtain the full co-operation of the patient in those cases where successful treatment depends, to some degree, upon proper *exercise*. And this difficulty is ascribed to weakened feet and to improper shoes.

For this reason, more and more physicians are recommending to their patients the Cantilever Shoe. The comfort of this shoe makes the patient ready to follow your instructions regarding exercise, and the corrective features, relieving the ills that arise from weakened and distorted feet, definitely assist your treatments. Their orthopedic features include a *flexible shank*, a *natural shape* and a *wedged heel*. All these features have the approval of prominent physicians.

Further data on the hygienic principles of the Cantilever Shoe are found in our new brochure, "The Feet and Their Relation to Anatomical Disorders", which we shall be pleased to send you. Please address the Cantilever Sales Corp., Dept. J2, 410 Wiloughby Ave., Brooklyn, N. Y.

CANTILEVER SHOES

SURGICAL**DRESSINGS**

Don't Stick to the Rule of Thumb!

It is common practice to use one's thumb when testing adhesive plaster for adhering qualities. If ever there was a fallacious rule of thumb this is it.

The primary function of adhesive plaster is to adhere firmly at body temperature. Many inferior plasters with soft compound cling to the thumb touch with startling tenacity, yet curl at the edges and slip when the heat of the body has further softened the compound.

BAYHESIVE adheres with the proper firmness because the adhesive mass is so compounded that it reaches maximum efficiency when it becomes body temperature. **BAYHESIVE** is intended for a surgical dressing and not for a thumb touch.

THE BAY COMPANY

BRIDGEPORT, CONNECTICUT

THE BAY COMPANY, Bridgeport, Conn.

M.E. 11

Gentlemen: Kindly send sample of **BAYHESIVE**.

Doctor.....

Street and No.....

City..... State.....

Dealer's name.....

All right, it is commercial; but it does the work, just as intended. I have no quarrel with credit as a business institution. It is all right and a necessity among business people of good credit; but an M. D. is sometimes forced by circumstance to do a credit practice with people who have no credit standing. There is the rub, and it takes careful study and handling to avoid being rubbed so deep we are made sore, and peeved and hurt financially and otherwise.

Most of the new patients see that "Office Practice Cash" sign staring them in the face, saying a whole mouthful silently yet insistently, and when they are ready to leave, they ask what their bill is and pay cash on the spot. If not, it is up to the doctor to back-bone up and state his cash terms. Few, except the hardened dead-beat, will stand up under that pressure.

In the Refracting Room I have a similar framed announcement "GLASSES CASH WITH ORDER." Although physicians disagree, I find after trial of all the various methods of handling refraction work, that it is more economical and efficient to retain complete control of the patient until proper glasses in properly fitting frames are secured and furnished complete. Many simply write the prescription for lenses, and leave the patient to struggle through the optical store as best they may.

My patients usually pay cash for glasses when they are ordered, or arrange part payment and the

balance when the glasses are delivered. This takes care of credit losses in this department very efficiently.

Charges for surgical treatment are usually discussed in advance and payment arranged for, so that credit losses on this phase are also reduced to a minimum. Except to people of well established credit, medicines or other supplies dispensed at the office are on a cash basis.

Those unable to pay cash for medicines dispensed and of doubtful credit standing, are given a prescription for the medicine, and left to fight it out with a hard-boiled druggist who gets his money with unerring accuracy when the patient gets the medicine ordered. This eliminates trifling credit losses on this phase, which in the long run mount up.

Where credit is given, statements are mailed to all patients the end of each month, and promptly on the last day of the month. It has been suggested that physicians send their statements the middle of the month to avoid the horde of tradespeople bills issued around the first. This may be worth consideration, but we find the better class of people can pay on the first as easily as on the fifteenth.

With this article there is reproduced a copy of the statement I send out. Note especially the "Terms of Credit" in the left-hand upper column. If paid on or before tenth of the month that bill is \$20.00; if not paid by the tenth it is twenty per cent high-

HYPERTENSION

Successfully relieved with Tildens

HAIMASED

An agreeable, non-irritating aromatic solution representing 2½ grains Sodium Thiocyanate to each fluid dram.

Prepared only by

THE TILDEN COMPANY

Pharmaceutical Chemists since 1843

New Lebanon, N. Y.

St. Louis, Mo.

Sample and Literature to Physicians on Request

er. In other words, the patient saves 20% by prompt payment, and loses 20% by slow payment.

The good pay patient usually saves his 20% without much ado about it. The slow pay who comes in after the 10th with a growl about his bill, is quickly shown where prompt payment saves 20%. It is left up to him.

The won't-pay and the dead-beat who have crept in on your credit do not bother about the discount one way or the other, as they do not intend to pay anyway if they can evade it.

The first of the following month a similar statement is sent to all patients whose bills are unpaid, reading as follows: "Gross amount due: _____."

The next month a similar statement is sent with the slip marked "A", reproduced in the beginning of this article.

On the fifteenth of the month, if no response is received, a third statement is mailed with sticker "B".

If no action is shown by this time, we have a won't-pay or a deadbeat to deal with; and the account goes to a collection attorney without more ado. If he can collect by fair means or foul, all to the good; if not the account is taken from the files and forgotten, except to remember to bar that particular patient against any future credit. From then on it is "Pay-As-You-Enter" or nothing; and a few of them ever come back to try their luck a second time.

This saves both time and money

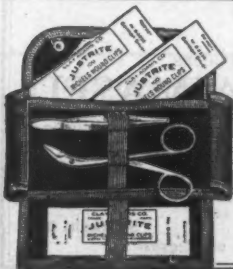
to the busy physician, giving him more time to serve his good pay patients, more time for recreation and diversion, and less money lost on bad credit risks. In other words money saved on a dead-beat is better than money lost in serving a dead-beat.

I have found the sticker system as efficient as any, and more efficient than most. The little stickers are plain, insistent and dignified. They say all that we need to say of a business transaction, and they say nothing that can offend any sensible person. There is no crude appeal to a lost sense of humor, or anything like that in them; yet they are courteous. They save time of writing letters, and above all save us from saying things we should not say in a collection letter.

In the early days of practice, I bought a whole book of the latest and most scientific methods of collecting accounts, with specimen collection letters, follow-ups, etc., that were so systematized as to be absolutely perfect in action; so psychologically accurate that the most hardened dead-beat would be irresistibly forced to disgorge once they were applied to him in proper rotation.

Theoretically that was some book. I read it from cover to cover, and also tried it out strictly according to that Hoyle gentleman, on not one but on many delinquents.

If it ever brought in one Indian-head penny, I fail to so recall, but that book did do me one good turn. It broke my faith



The "Justrite" Wound Closure Set

Ask your dealer to show you this handy wound suturing outfit. It consists of a tan canvas case with one each clip-applying forceps, clip removing forceps, and 100 each of three sizes JUSTRITE Michel's Wound Clips. The clips bring the edges of the wound close together, yet pierce superficial skin only, leaving no scars. Should be in every physician's emergency bag. Postpaid price \$6.50 with nickel plated instruments; \$8.00 with chrome plated instruments.

If your dealer cannot supply you, advise dealers name and send order and remittance to

Clay-Adams Co., 117 E. 24th St., New York

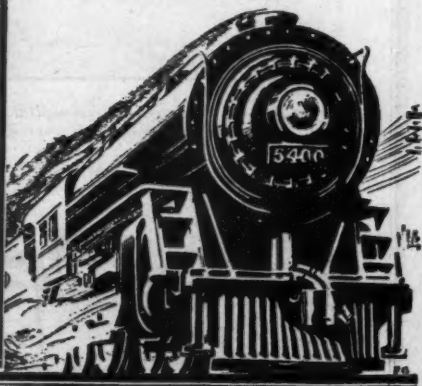
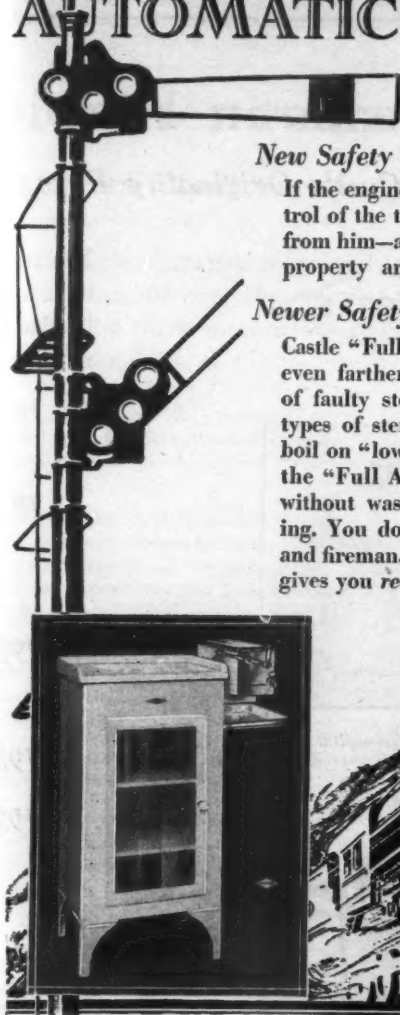
AUTOMATIC CONTROL

New Safety in Railroading

If the engineer fails in his duty the control of the train is automatically taken from him—and the train stops. Life and property are automatically protected.

Newer Safety in Sterilization

Castle "Full Automatic" Control goes even farther. It eliminates the chance of faulty sterilization. Old three-heat types of sterilizers might not actually boil on "low." No such possibility with the "Full Automatic." It runs itself, without waste, manipulation, or waiting. You don't have to play engineer and fireman. The new "Full Automatic" gives you *real* sterilization.



C. F. ANDERSON CO., Inc.

214 S. 7th STREET,

MINNEAPOLIS, MINN.

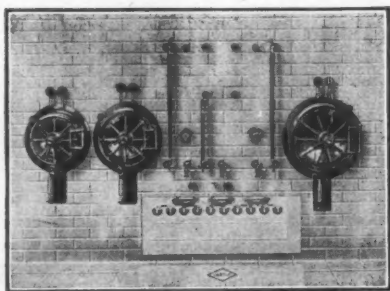


Castle Leads in Hospital S

Castle Originality Recognized



PRINCIPLE of
have influence
Castle equipm
with have reco



*Medical Arts Hospital,
Edinburg, Texas. Recessed
Sterilizers.*

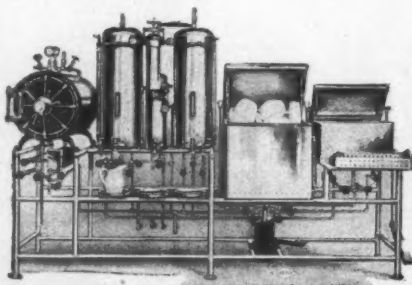
1917

1926

1927

1928

1929



*University of Minnesota, Bat-
tery of dressing, water and
instrument sterilizers.*

Sales and S

C. F. ANDE

Minneapolis,

212-214 So.

tal Sterilizer Improvements

Used by Hospitals Everywhere

PRINCIPLE of correct sterilization, pioneered by Castle influenced hospitals all over the country to select equipment. The three institutions names here have recognized the value of Castle improvements:

1917 Castle originated the principle of forced air evacuation for autoclaves, and eliminated the complicated vacuum device.

1926 Castle was the first manufacturer to add automatic control to insure positive discharge of all air and water, and thus eliminated the human element.

1927 Castle connected this automatic discharge direct to plumbing, and thereby eliminated the unsightly basin on the floor.

1928 Improved methods of Recessed Installation.

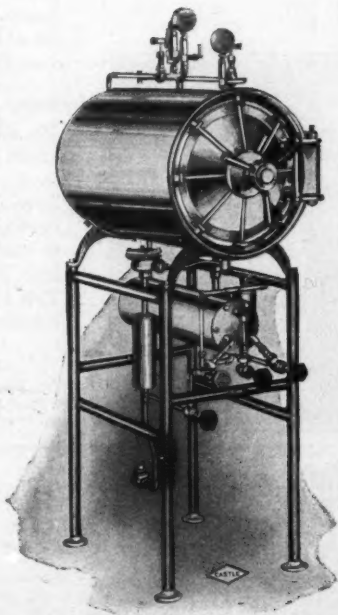
1929 Improved piping and venting systems which eliminated possibility of pollution of water supply or contamination of sterilizers themselves.

Sales and Service Agents

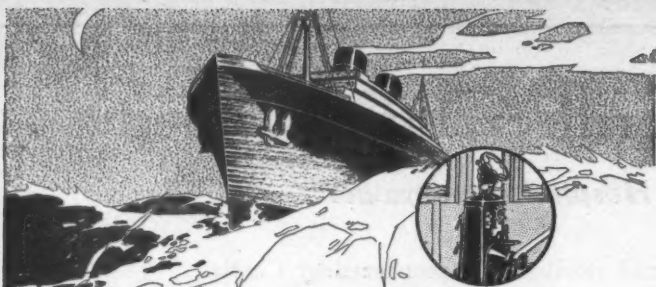
ANDERSON CO., Inc.

Minn.

214 So. Seventh Street



*Bethesda Hospital, St. Paul,
Minn. Direct Steam Autoclave.*



AUTOMATIC CONTROL



Safety on the High Seas

The "Iron Mike" steers ocean liners now, and keeps them straight on their course. It makes a safer and steadier job of it than the old "helmsmen," and does it *automatically*.

Greater Safety in Your Sterilizer

The modern Castle sterilizer, too, has a "Built-in Watchman." He protects the sterilizer and guards your technique. He realizes that the old 3-heat switch sterilizer might not boil on "low," and so stands on silent guard to guarantee true boiling and actual sterilization. This *Full Automatic Heat Control* has a surer memory than any human brain.



*Castle Full Automatic
General Practitioner's Sterilizer*

C. F. ANDERSON CO., Inc.

214 S. 7th STREET,

MINNEAPOLIS, MINN.

in any and all collection systems, except the system of backbone and common sense.

Different situations and different practices, of course, call for different methods of handling the business side of a medical practice. There is nothing original in the system I try to apply in my daily practice, and it may have to be modified considerably in a different location, or under dif-

ferent conditions. But I believe that if the average doctor will have the backbone to insist upon proper business methods in his medical practice, and handle his collections upon the same common sense methods other business men have found necessary in dealing with the public, he will be a happier, more efficient, more prosperous and much more appreciated "public servant."



Washington's New Shapes in the Sky

Continued from Page 30

age to be located close to one another. As medicine and surgery have advanced, and specialists in the different branches of the professions have gradually superseded the old time general practitioner, the advantages of being so situated have become increasingly apparent.

Before the modern office building was designed and built to meet the needs of the profession, doctors and dentists were already to be found clustered together on certain streets with their offices in private residences. Gradually they drifted into office buildings in groups. This proved to be an improvement over the office in the home, but they still lacked proper facilities, for the buildings were designed for general business purposes and not with the peculiar needs of the physician in view.

As a physician's practice grows he must be able not only to provide suitable waiting rooms, but also smaller rooms for examination and treatment of patients, rest rooms, laboratories and numerous other features that are not included in the general office building design. If the diagnostician refers a patient to a specialist he does not want to send her half a mile across town but would rather have the specialist within call. The advantages of proximity are also evident where consultations are necessary, and so on down the line.

Not many years ago professional men began to erect buildings designed and built to suit their special needs. In this the South and Southwest took the lead. One of the first to be erected, and one which is still operating successfully today, was

Add Colonic Therapy to your practice

A scientific development for colonic therapy which adds to your present practice a distinctive service for your patients.

The Schellberg Apparatus is efficient and thoroughly professional. The enema cannot be substituted for its scientific exactness. Write for descriptive literature and illustrated catalog.

SHELLBERG MANUFACTURING CORPORATION

172 Chambers Street,

New York City



"A Well-Equipped Office Is a Sound Investment"



A **PIECE** of equipment selected on a "good enough for now" basis is discarded, more often than not, after a short period of service. The gloss fades; the lack of craftsmanship becomes apparent. The *right* kind of equipment generally costs a little more—but the cost per year of service is *less*.

Furniture

Allison Office Furniture
W. D. Allison Co.,
Indianapolis, Ind.

American Metal Furniture
American Metal Furniture Co.,
Indianapolis, Ind.

Sterilizer

Castle Sterilizers
Wilnot Castle Co., Rochester, N. Y.
(See Page 3)

Pelton Sterilizer
The Pelton & Crane Co.
Detroit, Mich. (See Page 56)

Specialists' Office Outfits

**Sorensen Diagnostic
Treatment Cabinets**
C. M. Sorensen Co.,
Long Island City, N. Y.

Miscellaneous

**Schellberg Colonic
Therapy Apparatus**
Schellberg Mfg. Corp.,
New York City (See Page 60)

X-Ray Equipment

Acme-Engeln
American X-Ray Corporation
Chicago, Illinois

Victor
Victor X-Ray Corp.,
Chicago, Ill. (See Page 50)

Wappler
Wappler Electric Co.,
Long Island City, N. Y.
(See Page 58)

Physiotherapy Equipment

Acme-Engeln
American X-Ray Corporation
Chicago, Illinois

Eveready Sunshine Lamp
National Carbon Co.,
Cleveland, Ohio (See Page 60)

Hanovia Alpine Sun Lamps
Hanovia Chemical & Mfg. Co.,
Newark, N. J. (See Page 58)

McIntosh Diathermy
McIntosh Electrical Corporation,
Chicago, Ill.

Victor
Victor X-Ray Corp., Chicago, Ill.
(See Page 50)

Wappler
Wappler Electric Co.,
Long Island City, N. Y.
(See Page 58)

What Are YOUR Office Equipment Needs?

the Professional Building in Richmond, Va. This building was erected under the direction of Dr. Lawrence T. Price, who has served as president ever since the organization of the company. Other cities followed suit, and while a number of such professional or medical arts buildings have been erected, Washington, D. C. probably stands alone in having two modern office buildings used entirely by professional men, located on the same block, owned by different corporations directed by practically the same officers.

In the summer of 1924 Dr. Charles S. White called together a group of dentists and physicians for the purpose of discussing ways and means of erecting an office building for professional men in Washington. Marcellus E. Wright, an architect, and the writer, both of Richmond, Va., were invited to the conference because of their experience in designing and building the Professional building in Richmond and the Medical Arts Building in Norfolk, Va.

This meeting resulted in the formation of a company officered as follows: Dr. Charles S. White, president; Dr. S. Boyce Pole, vice president; Dr. Oscar B. Hunter, secretary, and Dr. Robert LeCompte, treasurer. These men with Drs. A. L. Miller, Edward P. Copeland, Edwin A. Merritt, Chas. W. Hyde, and the writer of this article, as directors, undertook to finance and erect the building.

It was not all easy sailing. First there was difficulty in selecting a suitable location due to the strict zoning laws of the District of Columbia. Finally a suitable site was found and then the new corporation set out to finance the building, sell stock, secure the necessary mortgage loan and rent the office space. This was not easily done, and the fact that the venture was new in Washington made it all the more difficult, for professional men and bankers are rather extremely conservative.

The members of the board of directors subscribed to the stock and kept at it until they had sold the required amount. Then they met with difficulty in placing the first mortgage. Money lenders were without experience with loans of this nature and doubted whether the space could be rented. Finally however the necessary capital was secured.

Construction was gotten under way and the first tenants moved into the building on January 1st, 1926. Interest in the project increased among the physicians and dentists as the building advanced, and the hesitancy that made it difficult to dispose of the stock in the beginning of the

Keystone Specialist Treatment Outfit



Treatment Table—Cabinet—
Compressed Air, Suction and
Pneumo-Massage Pump—combined
in one unit.

Complete with bottles, sprays,
vacuum cups, tubing, cut-off.

THE MAX WOCHER & SON CO.

Surgical Instruments and Supplies

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And Now—A Sterilizing Medium
Non-Injurious to Bard-Parker Blades
It Sterilizes

BARD-PARKER formaldehyde GERMICIDE

A powerful, non-corrosive sterilizing medium of high germicidal efficiency, prepared especially for sterilizing Bard-Parker Knives and other fine surgical instruments.

Extensive laboratory tests indicate that Bard-Parker formaldehyde Germicide:

Destroys the most resisting non-spore-bearing bacteria in less than two minutes.

Destroys the most resisting spore-bearing bacteria in one and a half hours.

Will not injure the keen edge of Bard-Parker Blades or other fine steel instruments

PRICES:

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One carton (12 pints) . . 10.80

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One carton (4-one gals.) . 18.00

Ask your dealer for circular giving complete description of Bard-Parker Germicide and Sterilizing Container. Detailed Laboratory Reports will be furnished upon request.



PARKER, WHITE & HEYL, INC.
369 Lexington Avenue, New York, N.Y.

project gradually vanished. Within ninety days after the building was opened all of the office space was taken over and there was a waiting list. From then to the present time there has been no vacant space in it.

To meet the demand for more space the officials of the company considered the advisability of erecting an addition to the building. This was found not to be practical and it was decided to erect a second building. A new corporation was formed. The stock sold readily this time and a site was secured.

Financial houses that had hesitated to loan money for the erection of the first building now offered to make the loan. The Federal American National Bank had given financial assistance to the corporation for the first building, had watched its progress carefully, and now through its President, John Pool, met with the officers of the building corporation and not only provided financial aid, but advised the board to go ahead with the purchase of the ground and erect the building.

This new building, the Columbia Medical Building, will be ready for occupancy by October first of the current year. Already 98 per cent of the office space has been rented. Space in the building is assigned entirely to physicians and dentists with a portion of the lower or street floor set aside for stores, and rented to dealers in drugs and surgical instruments.

Both of the medical buildings are well located. The Washington Medical Building, the first to be erected in the Capitol, is located at Eighteenth and Eye Streets, N. W., and contains approximately 50,000 square feet of rental space.

The Columbia Medical Building is located at Nineteenth and I Streets, N. W., just a few doors away, and contains approximately 62,000 square feet of floor space.

The two buildings form attractive additions to the Washington sky-line. Both of them are eight stories high and are of fire-proof construction with exteriors of limestone, brick and ornamental terra cotta.

The office suites are designed to suit the individual tenants, something that is not customary in the average office building. This makes possible the location of electric, gas water, and suction outlets at such points as are most convenient to the tenant, permitting the greatest economy of space and the saving of time and lost motion in their use.

All of the stock in these two buildings was sold by the officers and directors after the company was organized, and was subscribed to by prospective occupants of the buildings. No fee was charged for this service. Rents are collected by the corporation, thereby doing away with the commissions of a real estate rental agency.

The officers also serve without pay and while the board of direc-

A vegetable tonic Laxative
FOR HABITUAL CONSTIPATION

Especially valuable for aged people and those of
sedentary habits. They act gently and do not gripe.

Cascara Comp. Tablets
KILLGORE'S

Liberal Sample and Formula on Request

CHARLES KILLGORE

57 West Third Street

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CAPROKOL

**Gives Immediate
Ease and Comfort
In Pyelitis Cystitis Urethritis**



Sterilizes the urinary tract—sometimes with amazing rapidity—often without other treatment of any kind.

**SHARP & DOHME
BALTIMORE**

New York Chicago New Orleans St. Louis

Philadelphia Kansas City San Francisco

Atlanta Boston Dallas

tors have control over the affairs of the corporation, the actual operation and supervision of the building itself is in the hands of a house committee appointed by the president, from the membership of the board of directors. This committee, as well as the president, secretary, and treasurer make regular reports to the board.

The quality of the tenants is assured through the fact that all applications for space come to and must be passed upon by the board of directors of the respective buildings.

The outstanding features of the medical buildings, features which will appeal at once to those who are interested in the grouping of professional men under one roof, are the facts that of the seven buildings the writer has been identified with, all have met every financial obligation when due, have been profitable investments to the stockholder, and satisfactory both to tenants and to the patient.

This is true of the Professional Building at Richmond, Va.; Medical Arts Building at Norfolk, Va.; Medical Arts Building at Baltimore, Md.; Medical Arts Building at Scranton, Pa.; Washington Medical Building, Washington, D. C.; Columbia Medical Building, Washington, D. C., and the Medical Arts Building, Wilmington, Del.

Outstanding advantages that they offer to the tenant includes: economy of space through designing and building suites to suit the peculiar needs of the tenant, the use of joint waiting rooms and of the same secretary, nurse, and telephone, if desired; thereby reducing expense of office maintenance. He can keep in close touch with associate doctors for consultation and treatment, and is in a clean and well managed building supervised by those with whom the tenant comes in daily contact, and occupied only by those who are engaged in the medical or the allied professions.

"Getting Enough to Eat—

and then getting rid of it, are two of the great problems of life," says E. W. HOWE, the sage of Kansas.



The relief of intestinal stasis ceases to be a problem to the physician who uses Agarol, the original mineral oil emulsion with phenolphthalein, because Agarol may be safely used under any condition in medical practice.

Agarol contains no sugar—safe in diabetes; no alkali—does not interfere with digestion: no excess of oil—to cause leakage. Just the right proportion of ingredients to afford these desirable actions:

Softening of the intestinal contents.

Gentle stimulation of the peristaltic function.

Liberal trial quantities at the disposal of physicians upon request.

WILLIAM R. WARNER & CO., Inc.

Manufacturing Pharmacutists since 1856

113-123 West 18th Street

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in Syphilis

BISMOSOL

Neutral Potassium Sodium Bismuthotartrate

in aqueous glucose solution

(will not clog the needle)

for intramuscular use

For sample and
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Tours and Cruises

**[A department in which to find ideas
on where to go and how to get there]**

Ocean Cruises for 1929-30: The Round-the-World Cruise of the Belgenland, sailing December 20th, several Mediterranean cruises starting in January, February, and March, and the fortnightly Havana-Nassau-Bermuda cruise of the Red Star Line, are all described in literature offered by the International Mercantile Marine Company, One Broadway, New York City.

Vienna Medical Faculty Lectures: A program, in German, of medical lectures offered during 1929-30 by the Vienna Medical Faculty, is available by writing the Austrian Tourist Office, 574 Fifth Avenue, New York City.

Independent Around-the-World Tours: The Cunard Line and N. Y. K. Line are now offering some flexible trips for the traveler who likes to go alone. The literature is issued by the Cunard Line, 25 Broadway, New York City.

Impressions of My Land Cruise: A beautifully illustrated booklet that convinces one of the beauty of a trip through Old England. Written by Margaret Cross and published by the Great Western Railway, 505 Fifth Avenue, New York City.

The Pacific Northwest and Alaska: A 48-page booklet, with illustrations and maps, inviting one to the great Northland. Pub-

lished by Union Pacific System, Omaha, Nebraska.

Industrial Virginia: A 38-page book of facts useful to the visitor or new resident. From: State Conservation and Development Commission, Richmond, Va.

Bermuda: Bermuda is proud of her charms and this illustrated booklet gives expression to them. From: The Bermuda Trade Development Board, New York Central Building, New York.

Spanish-American: A pictorial folder on the Panama Mail cruise between New York and California. From: Panama Mail Steamship Company, 10 Hanover Square, New York.

100,000 Americans are Wintering in Europe: A reprint of the article by Edwin Robert Petere, originally printed in the Literary Digest. From: Institute of Foreign Travel, 30 Whitehall St., New York.

West Indies Cruises: The trips described in this charming little booklet visit the islands of Porto Rico and Santo Domingo. From: Porto Rico Line, 25 Broadway, New York.

California: This beautiful book should thrill the heart of a Californian. It is full of pictures and maps. For a copy write to:

Muriatogen

Lapenta

Johansen of Copenhagen (J. A. M. A. 1730, '29) says:

"The complete persistence of achylia in patients with pernicious anemia who in other clinical respects have recovered or, rather, have been compensated, undoubtedly supports the theories which imply that achylia is primary to pernicious anemia and that it is the possible cause of the development of pernicious anemia."

Muriatogen (Lapenta), a colloidal condensation product of hydrochloric acid with synthetic silicates, permits the therapeutic use of hydrochloric acid, either alone or associated with pepsin, in the form of coated tablets, overcoming the difficulties of oral administration of the acid itself. *Muriatogen is indicated in all gastric hydrochloric acid deficiencies, from hypoacidity to achylia gastrica. Literature and samples to physicians upon request.*

Pitman-Moore Company

Indianapolis

Chicago and Northwestern Lines,
148 So. Clark St., Chicago, Ill.

Winter Sports: A folder about Maine and the White Mountains with details about how to get there and where to stay. From: Maine Central Railroad, 222 St. John St., Portland, Maine.

Ceylon: Places to go by rail and automobile through southern India and Ceylon. The booklet comes from: American Express Travel Department, 65 Broadway, New York.

Mexico for the Tourist: This illustrated folder will make Mexico look as alluring as Japan or India, which it probably is. From: Ward Line, Pier 13, East River, New York.

South America and the Four Princes: An unusual set of literature gotten out in modernistic style is now being offered by the Furness Prince Line, 34 Whitehall St., New York City.

Agwi Steamship News: This is a little travel magazine, full of interest, gotten out by an association on steamship services reaching the Carribean. Copies may be obtained gratis from the Porto Rico Line, 25 Broadway, New York.

Lehigh Luxury Tour: Some personally conducted tours through eastern Pennsylvania, northern New York and Canada. From: Lehigh Valley Railroad, 143 Liberty Street, New York.

Clark's 26th Mediterranean Cruise: 96 pages that tell about a conventional winter cruise, but listing a number of ports not always touched. From Frank C. Clark, Times Building, New York.

Europe for the Independent Traveler: If you prefer to travel alone this booklet contains about 26 tours ranging in time from a few days up to a month or two. From Franco-Belgique Tours Co., Inc., 551 Fifth Avenue, New York.

Antiphlogistic mildly astringent

They relieve internal
hemorrhoidal symptoms

AMPLY tested by clinical experience for many years, Ungentine Cones have demonstrated that they possess the essential properties required for the successful non-operative treatment of internal hemorrhoids.

They not only allay irritation but are antiphlogistic and mildly astringent.

Many physicians have found that Ungentine Rectal Cones speedily soothe rectal burning, smarting and itching and give permanent relief in the greater number of cases that are not too far advanced.

To physicians who have never made use of Ungentine Rectal Cones and wish to learn of their efficacy in this local treatment we shall be glad to send a trial box of 12 without cost. Address Medical Department, The Norwich Pharmacal Company, Norwich, New York.

Each Cone contains:

Alum Compound (non-irritating)	3 grs.
Ergotin	1 gr.
Ammonium Sulphoichthylate	¼ gr.
Ext. Belladonna	½ gr.
Phenol	
Mentholated Cocoa Base	



Ungentine Rectal Cones

A Balanced Vitamin Potency



Maltine

WITH COD LIVER OIL

TODAY, there are a great many products of a medical nature on the market which contain one of the four important vitamins. There is a food combination which offers the doctor the use of all four vitamins. This is Maltine With Cod Liver Oil, taken with orange juice or any other antiscorbutic in adequate dosage.

Extensive laboratory tests of a leading biological chemist very definitely indicate that Maltine contains both the antineuritic and the antipellagic Vitamin B. This research further demonstrates that "Maltine With Cod Liver Oil" has a Vitamin A potency of at least 230 U.S.P. units per gram. The Vitamin D (anti-rachitic) potency is such that rachitic rats, fed on 20 mg. daily, showed perceptible to distinct healing of rickets in from 6 to 10 days by the line-test method. Copies of this report are available.

The value of such a preparation is at once apparent. Even in a rigidly prescribed food-diet, it is difficult to make certain that the patient is getting a sufficient quantity of the four essential vitamins. The commonly accepted vitamin foods are known to vary materially in vitamin content. But here, in one simple food-combination, the doctor has definite assurance of balanced vitamin potency. Clinical tests have shown that "Maltine With Cod Liver Oil" is much more palatable than plain cod liver oil, no matter how carefully the latter is disguised. It is easily administered and readily digested, even by infants.

"Maltine With Cod Liver Oil" is accepted by the Council on Pharmacy and Chemistry of the American Medical Association. The Maltine Company, 20 Vesey Street, New York. Established 1875.

They're All Fine Folk When You Get to Know Them

Continued from Page 25

made were pro-rated among all members who had reported the debtor. Each member had a rubber stamp stating that he was a member of the association and this was used on all statements sent out.

A printed announcement is distributed among patients, containing a list of the society's members, and reading as follows:

North East Kansas PHYSICIANS PROTECTIVE ASSOCIATION

The North East Kansas Physicians Protective Association was organized to protect its members against dead-beats and unwilling-to-pay debtors.

Each Association Member (which includes practically every physician in this locality) is notified regularly of all accounts owed to members by persons making no effort to pay.

All persons owing accounts for an unreasonable length of time to physicians are considered undesirable patrons and they will be denied medical services, except under unusual circumstances, by Association Members, but will be considered as pau-

pers and can obtain medical attention by applying for aid to the Board of County Commissioners.

To keep your name off of the Association's Dead Beat list it is only necessary that you

Pay Your Doctor

It is not the desire of the Association to deny one the benefit of medical services, neither is it the desire to render such service without compensation, except to worthy charity.

A commercial company has now taken over this work and includes the other commercial interests of the community, using a system of follow-up letters. For this they charge \$20.00 per year for each member desiring the service, and all payments are made directly to the creditor.

It was agreed that no doctor would attend anyone whose name was on the slow-pay list until they had paid those to whom they were indebted, and this has been adhered to, with exceptions for charity of course. Publicity was given through the newspapers of the action taken by the society and many dead-beats paid up in order that they might obtain future service.

The County Commissioners were having some difficulties with

Dimazon Ointment

(Accepted by the American Medical Association)

The continuous use of our ointment, over a period of sixteen years, is based upon positive and often excellent results obtained in the treatment of those intractable cases of

Eczema, Ulcus Cruris, Keratitis, Wounds, Burns, etc.

Samples and clinical reports upon request

Heilkraft Medical Co.

Boston, Mass.

In harmony with the modern policy regarding preventive medicine

TODAY, more than ever before, is the medical profession striving to free men and women from their traditional and harmful practice of dosing themselves with laxatives and cathartics.

Kellogg's ALL-BRAN is being recommended by physicians everywhere as a safe and sure means to prevent constipation. Since it is all bran, it supplies the system with a generous quantity of bulk which promotes peristalsis *naturally*. No part-bran product can be so effective.

Cooked and crumbled by a special process, Kellogg's ALL BRAN has a distinct and delicious flavor that every patient likes. So many ways to enjoy it also. As a cereal with milk or cream, or with fruit or honey added. Or, as an ingredient in favorite cooked dishes which lack roughage.

Made by Kellogg in Battle Creek, Michigan. Sold by all grocers. Served everywhere. A full-sized package of ALL BRAN will be mailed free to any doctor upon request.

Kellogg's
ALL-BRAN



the public health of the county, due to lack of co-operation of some of the irregulars. A committee from the society met with them and helped develop a full-time Public Health Service, so that now one specially trained physician, one nurse, and one office assistant devote their entire time to health conservation, maintaining offices in the courthouse and being paid in part by the county and in part by the state.

In the countyseat, Hiawatha, are eleven physicians. During the summer months these men want some Sundays off, so two are designated for each Sunday, by turns. They agree to remain in town, available for emergencies during that day. After the morning routine of calls is over the other nine are free to play golf, go visiting, or otherwise enjoy themselves.

Announcement of the doctors on duty for the next Sunday is made in the local daily. Families cared for, not of one's regular clientele, are referred to the regular attendant on his return. One or two "skunk members" would ruin this plan but these men are all gentlemen so that the plan is a success.

At this time a committee is working on a plan to place practice on a cash basis, and among other things have investigated the plan of the Nebraska town mentioned in the February issue of MEDICAL ECONOMICS.

These ways of getting together have built up an ideal spirit of comradeship in those who take part; the few members who don't attend miss many good and profitable times. We have found that the other physician can be a comrade in the healing art, and as such, a much finer fellow than he appeared when viewed as a commercial competitor. The wives realize that the problems of the other doctor's wife are much the same, and that they are all mighty fine folks, when you get to know them!

(Turn the Page)



KELLOGG'S tasteless CASTOR OIL



TASTELESS
ODORLESS
PURE
NO AFTER-NAUSEA



full strength
U - S - P

May we send you
a trial bottle free?

WALTER JANVIER, INC. M.E.11
121 VARICK STREET
NEW YORK, N. Y.

Gentlemen:

Please send me free of charge a
Convenient Size bottle of Kellogg's Tasteless Castor Oil.



Dr. _____
Address _____
City _____
State _____

The Restless Patient

*can be
helped to
sleep by a
hot drink
of Oval-
tine.*



AS you know, many restless patients—particularly convalescents—need a warm, nourishing drink before bedtime to help them sleep soundly.

Ovaltine is ideal for this purpose. First, it is unusually palatable. Second, it is rich in nourishment. Third, it is remarkably easy to digest.

You will often find that it just requires a glass of Ovaltine at

bedtime to get the patient into that sound, refreshing sleep which is so essential.

We would like to send a regular size package of Ovaltine to your home address. We want you to know how delicious and how effective Ovaltine really is. This coupon will bring it to you.

THE WANDER COMPANY Dept. M.E. 11
186 No. Michigan Ave.,
Chicago, Illinois.

Please send me a regular size package of Ovaltine, for my personal use—without charge.

Dr.

Home Address.....

OVALTINE

And that doesn't take such a long time when the ice is broken, even if it has to be done by standing on one's head or playing leap-frog.

I wonder if there is any other county society in the country

which can boast of more than 100% membership, as we do. The four physician-members in the adjoining county give us this status; in fact the president and secretary for this year do not live in the county.

Financial Pitfalls I've Learned to Dread

Continued from Page 21

drels who make their miserable living through deceit.

But after such harrowing experiences I would be an idiot indeed if I did not profit by them. Experience is of no value unless it helps you to cultivate a habit of reflection and a determination not to commit the same error again. But the same error will assume a Protean form, and one will fall without seeing the pit.

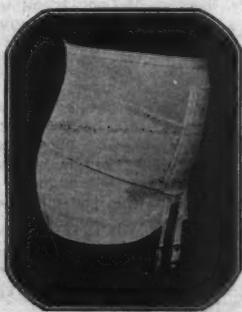
If I had had an astute lawyer with my interests at heart, every proposition would have been submitted to him before committing myself to paper. Even so, that is no guarantee of absolute safety. Yet the danger would have been minimized. When buying

property, I should have paid \$50 or \$100 to a good, impartial appraiser who would have seen to it that I did not pay too much; and the carrying costs could have been figured beforehand, so that the actual situation that later developed could have been foreseen and avoided.

In this world you are bound to take chances; everyone must take them, without taking them there would be no material progress. Good judgment must be added to good luck in order to achieve success. Bad judgment and bad luck will ruin any living soul, and I have had plenty of both.

(Turn the Page)

"STORM"



"TYPE N"

Every Storm Belt
is made to order

The "Type N" Storm Supporter

meets demands of present styles in dress. Takes place of corsets. Special long laced back; soft extension low on hips. Excellent hose supporters attached. For Ptosis; Hernia; Pregnancy; Obesity; Sacroliliac Strain; Kidney conditions; High and Low Operations, etc.

Ask for Literature

Katherine L. Storm, M. D.

Originator, Owner and Maker

1701 Diamond St. Philadelphia

Your patients enjoy

Good Coffee

just as much as you do!

UP FROM a night of restful sleep, and down to a rich, steaming cup of coffee! How good this fragrant drink tastes to you, *any* time of day! What a cheering, sustaining beverage it is! You wouldn't think of doing without it.

Your patients feel the same way. They like coffee. They welcome the zest it lends to eating, the stimulation to appetite in its rich aroma. As a matter of fact, the thinking physician recognizes in this appetizing article of food a definite aid in the cause of therapeutics—a mild cardiac stimulant, a renal tonic, a laxative, a counter to shock and collapse. Far from prescribing it, he realizes that there are few patients, indeed, for whom coffee is contraindicated.

Dr. Ralph H. Cheney, biologist of Long Island University says, "Coffee is a beneficial and harmless stimulating beverage," and "the outstanding fact in favor of coffee is the absence of any after effect or sub-normal recuperation period."

An arresting and impartial report on his three-year investigation of coffee has been prepared by Prof. Samuel C. Prescott, Director of the Department of Biology and Public Health at the Massachusetts Institute of Technology. If you will write your name and address in the coupon below, we shall be glad to send you this report, together with a leaflet that gives six simple rules for the brewing of better coffee.

BRAZILIAN-AMERICAN COFFEE PROMOTION COMMITTEE
64 Water Street, New York City.

Gentlemen: You may send me the Prescott report and the leaflet on better coffee-making.



Name _____

Address _____

Now my advice to you is this: Regard anyone who comes to you with something to sell, with suspicion. He may claim to be a close friend; he may honestly think that he is doing you a service, but usually he has his own axe to grind, and expects some material advantage from such action as you may take. Be sure you understand the business proposition in every last detail. Then get one or more paid opinions (free advice is worth just what it costs) and form your own judgment upon such evidence as you have been able to adduce.

Some time or other somebody is going to offer you a "sure thing" in the Stock Market. "You simply cannot lose. This tip to buy came to me from one of the biggest men in the Street."

Look out! The biggest men in the Street work together like the works of a watch. If you have done a great kindness to some multi-millionaire he may put you in the way of making money, but he may be wrong or something unforeseen may vitiate his judgment. The sharks in Wall Street are made independently rich by professional men, teachers, writers, musicians, and those lower down in the scale of public service—doormen, waiters, etc.

There is just one way that you may possibly take a little money out of Wall Street, and it is the only logical way for a poor man to do it. Here it is: Stocks have gone along on an even keel for some months. There is not much

activity in the Street. Then comes a sharp rise with all the above-named gentry rushing headlong into the melee only to be painfully shorn later on. Stocks continue to soar and you itch to buy and make some money too, but you refrain and some fine day a bit of news comes out; we are on the verge of war, or the President resigns, or some other story which causes the big men to throw their surplus stocks overboard.

There are always a few good leaders which are bound to be good if the management is right.

You keep a few thousand dollars liquid, that is in some bank or other place where you can go and get it on a moment's notice. Buy as much as you can pay for, a dividend paying stock, of course, and put it in your safe. Meantime you will get interest. Then some day a new "boom" is on. The market takes a rise. Then decide what you think is a decent profit and sell out. Don't mind if you could have gotten twice as much by holding on longer. The fellow who bought hopes to make a profit too. Let him do it. Now put your capital in gilt-edge bonds. Keep your profit liquid and do the same trick over again.

Never buy into wildcat schemes of any kind. If the big men in the Street will not touch Monarch Oil or Nodoubt Copper, you cannot afford to touch it either. Nine out of ten of these things are fakes. I have almost been obliged to put these fellows out of my office by force. They are very

**The
FITCHMUL
Formula**

Canadian Fir
Balsam
Venice
Turpentine
Chloric Ether
Hydrocyanic
Acid
(minute
quantity)
Tartar Emetic
Aromatica



**A Bronchial Sedative
Expectorant—Vehicle**

A Nebraska physician writes:—
"I have been using FITCHMUL and like the results."

A North Carolina Doctor says:—
"I tried FITCHMUL in cases of Bronchitis and remarkable results were obtained."

These opinions voice the nation wide physicians' approval of FITCHMUL.
Write for Sample.

A. Perley Fitch Co., Concord, N. H.

The Heating Season Is Here—

TO prevent "colds" and "sore throats" from developing into virulent onslaughts of respiratory disease—and to protect against relapses or dangerous sequelae—your patients need adequately heated and ventilated rooms—and above all—the increased power of resistance, the better metabolic function, materially aided by

Gray's Glycerine Tonic Comp.

(Formula Dr. John P. Gray)

Literature and samples on request.

THE PURDUE FREDERICK CO., 135 Christopher Street
New York City

"Sepsis Sneaks In Like a Thief In the Night"

To attempt to destroy infection at the port of entry is important. Equally so, in many instances, is the internal administration of agents claimed to oppose or overcome depraved or toxic blood conditions.

ECHITONE

is an active and effective combination of true Echinacea Iris and Viola, properly gathered, prepared and capable of being in dosage pushed to effect.

Also in the "typhoid state" in pneumonia, influenza or infectious acute disease, eczema, psoriasis, Acne, furunculosis, erythema, syphilis.

CYSTO-SEDATIVE

is efficient in cystitis, prostatitis, prostatic enlargement, strangury, incontinence of urine, urethritis (acute or chronic).

Samples and literature on request.

STRONG, COBB AND CO., Inc.
Cleveland,

Ohio

enthusiastic and will tell you how it would have turned out had you bought N. Y. Edison at 30 cents a share 100 years ago, or something of the sort.

Don't listen, or, if you listen, think up some subterfuge, or tell them that you have a man, your banker, perhaps, who must pass on all such things, and that you would never go into a gamble anyway. Or tell him that you are tied up head and tail and have had no vacation, have not been to the theatre for a year, or something like that. It is surprising how truthful you can be and have it sound right, but some of these men hang on until you insult them. You may have to do so to save your purse.

Nearly every doctor plays the market. Most of them record their successes with glee; you never or seldom hear of their losses, and yet I know of only one who "cleaned up". But he was never much of a physician. His financial success was due to somebody who was strictly on the inside. Most of my medical acquaintances have lost heavily. I lost years ago, but not quite soon enough to keep me from getting hurt. However, I have kept out of it for 15 years. But maybe I have done just as badly in other things.

Real estate is sometimes a fine investment, but only under certain conditions. First, I will tell you why and when it is dangerous. Most "improved" property is a constant source of worry because of the upkeep; apartments require constant painting, carpentering, plastering and general fixing. Every tenant feels sure you are getting rich because of the high rent he pays you, and therefore thinks no request of his can be unreasonable. He will call you out of bed because a shade has blown down, and if you do not have it fixed forthwith, he will stop paying rent and you cannot do a thing about it if he does. The courts usually support a tenant against a landlord. Then you have to pay for janitors, disinfectant, specialists, renting agents,

WHEN hepatic secretion is suppressed, in whole or in part, the process of digestion ceases to work smoothly and after a time the sufferer seeks professional advice.

Among the several agents recommended

CHIONIA

*A Preparation of
Chionanthus
Virginica*

has won a position of prominence. It has been in use for so many years that practically the entire profession is acquainted with its value as an hepatic stimulant. Prepared exclusively for Physicians' Prescriptions.

Gentlemen:

Please send me a professional sample of CHIONIA.

Dr.

Address

Peacock Chemical Co.

St. Louis, Mo.

LACTO-DEXTRIN IN COLITIS



WHEN a putrefactive flora is dominant in the colon, poisons develop, which paralyze the bowel, leading to constipation and colitis.

Lacto-Dextrin

(Lactose 73%—Dextrin 25%)

Has been found a most efficient remedy for the treatment of colitis. It is a true corrective because it acts by providing the proper soil for the growth of the antiputrefactive germs, the *B. Acidophilus* and *Bifidus*.

Restoring the normal flora with Lacto-Dextrin promotes a return of normal intestinal activity.

Why not try the effect of Lacto-Dextrin in some of your obstinate cases of colitis?

We will be glad to send you free clinical specimen, not only of Lacto-Dextrin but also of *Psylla* (plantago psyllium), the plant seed which is sometimes used in association to provide bulk and lubrication.

Mailing us the attached coupon will bring you specimens and copy of the presentation, "A Practical Method of Changing the Intestinal Flora."

Mail Us This Coupon Today

THE BATTLE CREEK FOOD COMPANY

Dept. ME-11, Battle Creek, Michigan

Send me, without obligation, trial tins of Lacto-Dextrin and *Psylla*, also copy of treatise, "A Practical Method of Changing the Intestinal Flora."

Name.....

Address (write on margin below)

and an army of others, all of whom want to rake off something from your pile of "easy money".

Stores are better, because such tenants take a long lease and pay for their own repairs or changes in partitions, etc. They also must pay for insuring the glass in their show windows. But even so, you may find taxes and interest running away with you, and in any case the depreciation is large each year.

If you can live in a house and rent part of it, there is a chance of coming out with, say, 10% on your capital, if you can stand the annoyance. But the only one who can make money this way is the builder and even he gets stuck at times, because he does big business on small, ready cash, always expecting the money earned from the last venture to pay for the next one and leave a profit for a bigger development.

Vacant land, plots, are good if you can turn them quickly, but if you are the last man to sit with them you will have to take

a beating, as the carrying charges will in time eat up more than any possible profit can ever amount to. I made \$26,000 on plots around Hampton in a little over one year. Then I traded a "slow one" for improved property and repented it the rest of my life.

If you can in some way use either vacant or improved property for your own use, you will then get something out of it, but if it is far away, or out of your reach, it is a losing speculation.

Again I must repeat, do not go into this sort of thing without the advice of a real estate man who has no interest of his own at stake, or unless you know a good realty lawyer who is "on" to all the tricks; for this business is surely full of pitfalls. However, there is the other side: This building where I am sitting, cost us doctors under the cooperative plan about \$500,000. We have just been offered \$700,000 after seven years use. The land, not the building, is valuable.

(Turn the Page)

Doctors Get Tonic Effects Never Possible Before

IN those many cases in every practice where tonic effects of calcium, sodium, and salicylic acid are an aid to recovery, Hagee's Original Cordial Compound is preferred by many physicians above all else.

They have seen its results. They know its long record. They realize that its calcium and sodium are readily assimilable, being in glycerophosphate form. And they know, too, that Hagee's Cordial is prepared with the true extract of cod liver oil as one ingredient.

Entirely at the suggestion and prescription of physicians, four million bottles of this modern tonic have

been used. That is an endorsement which doctors seldom give to any preparation.

You, too, will find it of great value in the many cases of underweight and undernourished condition, lack of calcium balance, convalescence, loss of appetite—and as a substitute tonic where the fat and taste of cod liver oil cannot be tolerated.

Allow us to send you a full size sample bottle. Simply send your name and address to

KATHARMON, CHEMICAL COMPANY
Dept. U.

101 N. Main St., St. Louis, Mo.

Hagee's Original Cordial Compound

Dispensed by all druggists in 16 oz. bottles

This has been going on for Seventy years

DURING the last seventy years, Borden's Eagle Brand Condensed Milk has successfully fed millions of babies. More times than can be counted, it has provided a safe, sure milk supply when other supplies were questionable. Because of its extraordinary digestibility, comparable only to that of mother's milk, it has promoted the strength and growth of thousands of babies who were unable to assimilate any other food.

Three generations of physicians have recognized Eagle Brand for these reasons, and have used it with good effect. Many physicians of the present day continue to find Eagle Brand of therapeutic value in various oft-recurring problems of artificial feeding.

... And this has been going on since 1857! Certainly Eagle Brand is no untried newcomer in the infant feeding field.

Naturally, it is not claimed that this form of milk is the perfect food for all babies. In the hands of the skilled pediatrician, however, Eagle Brand is an extremely flexible food. In proper dilutions, and with proper supplementary feeding, Eagle Brand is easily adapted to fit the individual need . . . In cases where digestibility is of supreme importance, Eagle Brand continues, year after year, to give exceptionally satisfactory results.

We shall be glad to answer any questions regarding the use of Eagle Brand and to supply you with literature upon request.

In addition to our own regular literature we have secured a number of copies of the excellent pamphlet by Hugh Chaplin, M.D., and Edward A. Strecker, M.D., entitled "Signs of Health in Childhood. A picture of the Optimal Child," published by the American Child Health Association. The Borden Company will be pleased to send you a copy upon request.

Address:

DEPT. M. E.—11-29, THE BORDEN COMPANY
Borden Bldg., 350 Madison Ave., New York City

Eagle Brand Condensed Milk

A physician bought two co-operative apartments. He lived in one and saw patients in the other for some years. Then he moved into the ancient house and lived there for three or four years, and finally sold it for over \$100,000, making at least \$50,000 to \$60,000 profit. The same plan has often worked with a two-family dwelling, where the owner could live in one part and get enough rent from the other to pay the carrying charges. He then has rent free during tenancy and a profit for living there.

You can learn a great deal from the ways of the scalpers but you will not always wish to follow their practices, which are too often unscrupulous. They do well in buying mortgages. A good piece of property may carry several mortgages, or it may have been mortgaged to the limit, that is there may be no cash value in the property, no "equity", in technical language. But suppose you know that a piece of land or a building is worth \$50,000 at a conservative estimate, and that there is a first mortgage of \$25,000 and a second of \$10,000. If you can buy the second for \$7,000 you will have made \$3,000 at once, but this will not be paid until the mortgage comes due.

It may have a pre-payment clause and be paid off sooner, in which case you are in luck. Meantime you are receiving 6% on your money, and if it is a good mortgage certain "amortization" sums are paid off the principal at fixed intervals. The discount from face value is usually 5% a year. Some of these can be bought with a guarantee by a good title company which makes them very safe investments. Of course, something may happen which will make it necessary for you to foreclose, but you should have your lawyer figure the cost of this before buying the mortgage.

In other words every contingency must be gone into fully. A friend has made a good deal of money buying and selling mortgages for his Bond and Mortgage Company. He is very keen and

always has good advice from his lawyer before making such a purchase. This sort of thing is good business for a doctor as there is a minimum of worry and the returns are from 12 to 15 per cent. As each mortgage is paid off, the whole profit, capital and interest, is re-invested, and so the amounts roll up nicely with the years.

* * *

A very human letter, this document left by my friend, and not at all like the fictional get-rich-quick tales which haunt the dreams of the average investment amateur. I hope it will have as salutary an effect upon my fellow-readers as the doctor meant it to have upon his children!

Vera Perles of Sandalwood Compound

FOR treatment of subacute and chronic inflammation of the mucous membranes, especially of the urinary tract, Vera Perles of Sandalwood Compound have been found effective. Two Perles, with or after every meal, as directed, constitute the usual dosage.

CONTAINING


East India Sandalwood	
Oil	0.0616 c.c.
Haarlem Oil	0.1243 c.c.
Copaiba Oil	0.0616 c.c.

A generous sample for clinical trial will be sent upon receipt of your request.

THE

PAUL PLESSNER CO.
Detroit, Mich.

What happens to SUGAR in the body?

 *Sugar is the most prominent fuel burned in the body*

WHEN sugar is digested, it is absorbed from the intestines and carried to the liver. From the liver it is converted into glycogen, an animal starch. Later on the glycogen is passed on and stored as glycogen in the muscles. It is in the muscles that sugar is burned to keep the body warm. The muscles are the fire-box of the body.

When the body has both sugar and fat available at the same time, sugar is burned by preference. To use a military analogy, sugar is the first line of troops and fats are the second line of troops. Day in and day out, sugar is the most prominent fuel



burned in the body, and on a day of added exertion, the amount of sugar in the diet should be increased.

Not only is sugar burned in the body in preference to fat, but fat is properly burned only when sugar is also being burned.

For such reasons the public finds the use of sugar so important. The Sugar Institute, 129 Front Street, New York City.

Who's to Blame for Charity Abuse?

Continued from Page 15

ic though able to pay, you will get the answer.

If they are thus to be kicked from pillar to post by one medical mechanic after another, they would just as willingly go through the operation in a clinic free of charge as to pay for the ordeal in a pretentious office.

If they are to be received routinely by a standardized secretary just as one patient in a row, it is just as agreeable to stand in line at the clinic, and so save money to spend for the numerous luxuries available today.

Desire to be treated as an individual, to have personal attention, is universal and the patient is quick to detect the fact that he is being treated as "just another case".

Let us look at an experience in health work which comes to my attention as I write. In the city where I am health officer all chil-

dren entering the public schools must be vaccinated against smallpox, and it is therefore up to the health department to do more or less of the vaccination.

A woman brings in a child to be vaccinated and volunteers this statement "You know my doctor vaccinated my other two children twice and it never took. Then I brought them to you and it took the first time. I took this child to my doctor a week ago and had her vaccinated (the nurse did it) and it didn't take. So I am bringing her to you."

What has happened. First, the doctor has not been careful of the quality of the vaccine he used. Stock vaccine in a drug store may pass through many vicissitudes within its time limit of virulence. Second, the physician became an office instead of a personality, and a nurse in the health department would have been just as satis-

A Purely Vegetable Laxative

Non-irritating

Not habit forming - Pleasant to take



NORMACOL is the coated granules of a species of bassorin sap with about 1% cascara sagrada.

The action of **NORMACOL** is due principally to its ability to increase twenty-five times its original volume in the intestinal tract. This volume stimulates peristalsis and results in a soft, smooth and non-irritating bulky evacuation of the bowels without pain, griping or digestive disturbances.

Samples and literature upon request



SCHERING CORPORATION

110 William Street
New York, N. Y.

SMOKE TO YOUR HEART'S CONTENT

and

WITH CONTENT TO YOUR HEART

SACKETT

CIGARS-CIGARETTES-TOBACCO

DE-NICOTINED

(BULK OF NICOTINE REMOVED)

FRAGRANCE AND FLAVOR RETAINED

AFTER many years of experimenting, the manufacturers of
Sackett De-Nicotined Tobacco Products

finally discovered the only known process, which, without the use of chemicals, eliminates the bulk of nicotine from tobacco and still preserves the aroma and taste.

Sackett De-Nicotined Cigars

Moisture Nicotine

8.85% 0.45%

From an analysis by

DR. PHILIP B. HAWK, Food Research
 Laboratories, New York City

"Probably Entirely Harmless
 to the Average Person."

—"AMERICAN MEDICINE,"

January, 1929, Issue.

For \$1.00 we will forward by parcel post, charges prepaid and insured, one each of our seven different styles of cigars, or sample Order of our different styles of cigarettes, or one five-ounce tin of tobacco as a trial order, or the three assortments for \$3.00. We will take back (and pay all charges) any of our products that do not come up to your expectations. *The New York Indemnity Company* has issued a bond guaranteeing our statement.

Mail this coupon

Dept. M. E.		Ck.	
Please ship me, carrying charges prepaid:		I enclose Mo. for \$ _____	
<input type="checkbox"/> 7 Sackett Cigars for _____	\$1.00	Name _____	
<input type="checkbox"/> One 5 oz. Tin Sackett Tobacco		No. and Street _____	
for _____	\$1.00	City _____	
<input type="checkbox"/> Sample Order Sackett Cigarettes		State _____	
for _____	\$1.00	Please mark cross (X) in square for	
<input type="checkbox"/> Above 3 assortments for _____	\$3.00	assortment desired.	

The Bonded Tobacco Company

Incorporated

1182 BROADWAY

NEW YORK CITY

Write for illustrated booklet

factory as the one in the doctor's office, without the \$2.00 per.

Dr. Wynne may be able to get the children of New York City inoculated against diphtheria by routine methods at \$2.00 per shot, but there are many communities where the public will demand just a little more of the personal if they are going to pay for it.

One time we thought we had the greater portion of the typhoid inoculation in this city turned over to the private physician, but their attitude spoiled it. In carrying on this particular service they were no longer physicians; they became mechanics. They let such patients be served by the office nurse, and the patients therefore came back to the health department for inoculation when it was needed again. They remembered that in the health department we at least inquired about other members of the family, whether they needed or were taking the inoculations, and that we made record of those we were giving.

There were, I am glad to say, many exceptions but these occurred only where the family physician relationship had been more or less strongly developed previously.

At least 15% of the average general practitioner's patients are neurotic. About 15% more are neurotic with some physical disorder. 30% have neurotic tendencies or conditions with some physical basis. The remaining 40% are made up mostly of acute infections.

It is not surprising then that quacks and cults are able to flourish. The profession might well take lessons in the special interest and attention given by these social and economic parasites.

Even the clever ruses they use to make a profound mental impression have, in many cases, a therapeutic value. One never hears any charlatans kicking about free or semi-free medical service.

The old family physician lost many a patient to the younger,

Accuracy of dose and effect

IN the modern laxative as in other modern therapeutic agents, the physician demands predictable effect, free from complications. It is for this reason among many others that Feen-a-mint is a favorite among specialists and general practitioners alike.

The sole active ingredient in Feen-a-mint is a carefully regulated amount of phenolphthalein—the most dependable and most thoroughly tested of all modern laxative drugs. This phenolphthalein is rapidly eliminated from

the system after its work of promoting laxation is done, without affecting either circulation or respiration.

The form of Feen-a-mint—mint-flavored chewing gum—is a second important aid to maximum efficacy. The pleasant taste brings ready patient cooperation, and the thorough mastication insures ingestion of the phenolphthalein in the best possible way—thoroughly mixed with the saliva.

A generous Physician's Trial Sample of Feen-a-mint will gladly be sent you free upon request.

FEEN-A-MINT

The Chewing Laxative

Health Products Corporation, Dept. M.E.-11,
113 North 13th Street

Newark, N. J.



Using the Beauty Appeal in Promoting Dental Hygiene

WHAT
KOLYNOS
SAYS TO
THE PUBLIC

No. 3

"Many a girl is pretty—until she opens her mouth. Then yellow teeth kill all charm!"

"Yellow teeth are not 'natural' or necessary. They're simply teeth coated with mucin or plaque which forms in the mouth. This plaque absorbs stains, turns yellow and discolors the teeth. It also causes bad breath and 'bad taste.'"

"A half-inch of Kolynos on a dry brush fills the mouth with a tingling foam that is antiseptic, germicidal and plaque-disintegrating. This 'live' and active foam works on the yellow mucin or plaque like millions of tiny fingers. It breaks it up and washes it away."

THERE are still in the United States probably seventy-five million people who do not brush their teeth. For approximately one hundred and ten million people there are only sixty odd thousand dentists.

The dentists and the dental hygienists together cannot alone master the situation. Further assistance is needed. This is coming through educational work in the public schools, together with the co-operation and encouragement of the parents, and general practice in the home of oral hygiene principles.

The Kolynos Company, through its advertising to the public, is promoting the general

practice of oral hygiene. The world-old beauty appeal is one of the many sound advertising themes being used for this purpose.

The use of Kolynos Dental Cream has particular significance because of its germicidal properties, which reduce the oral flora 80 to 92 per cent.

Kolynos, containing soap, loosens the bacterial plaque, while its chalk content polishes the teeth with no danger of abrasion.

*May we send you a
Physicians' Package?*

THE KOLYNOS COMPANY
NEW HAVEN CONNECTICUT

more up-to-date doctor because the latter made a thorough physical examination. Now the up-to-date man is losing, in turn, to the clinics because of the cold-blooded routine of his own office. In the clinic the service does not cost as much and there is likely to be some interne who is particularly interested in learning something from the patient's case, and who will therefore manifest the interest which the patient desires or demands.

The public is willing to pay to the limit of its ability for the interest of the old-time family physician, for that service or personality which inspired his patients to believe that his presence, his prescriptions, or his pills closed the door to suffering and death.

When the profession thinks enough of these psychological aspects of medical practice and ceases to regard patients as machines made up of an infinite number of cells to be treated in a purely scientific manner; when the doctor ceases to be reaching for his hat and edging toward the door during most of the time he is discussing the case with the patient or his family; then neither quacks nor clinics will be a care to the profession.

Patients rejoice at the success of their physician and wish him to be busy, but when they are ill the desire becomes paramount that they be, for the time being, the *only* patient in the world for their physician. They look to him to ease both body and *mind*.

As a health officer going from house to house for the purpose of investigating communicable diseases, I am convinced by the conversations I overhear and the statements the people make to me, that doctors themselves are the worst enemies the profession has. I am fully aware that scientific medicine is the *only kind of medicine*, but at the same time the wise physician will temper his scientific medicine with a deal of humanity in his contact with the patient, and the patient's family and friends.

Thialion

is a dependable agent to prescribe in rheumatism, gouty conditions, biliousness, constipation and wherever there is evidence of acidemia or decreased alkalinity.

Literature on request

VASS CHEMICAL CO.

Danbury, Conn.

EFEDRON

(Hart Nasal Jelly)

Exhibiting ephedrine hydrochloride in a water soluble jelly base for use in treatment of all inflammations of the nose.

The following advantages are peculiar to EFEDRON

1. Free and maximal ephedrine action. Immediate re-establishment of normal breathing space by shrinking the mucosa, in all inflammations, acute or chronic, in infants or adults.
2. Prolonged soothing contact—prolongs ephedrine action without reaction—allays irritation and avoids insulating effect of oily bases.

HART DRUG CORP.

12 N. E. 3rd St., Miami, Florida

Send me large size tube FREE.

M. D.

This Month's Free Literature

[A department whose purpose is to help physicians
keep in touch with current literature and samples]

The Economics of Vitamines: A bulletin whose purpose is to encourage a correct understanding of the food value of oleomargarine. For copies write: The Institute of Margarine Manufacturers, 1049 Munsey Bldg., Washington, D. C.

* * *

Sanmetto: Literature on the use of Sanmetto in the treatment of enuresis and genito-urinary diseases is offered by the Od Chemical Co., 61 Barrow St., New York City.

* * *

Samples of Angostura: Fifty or so years ago no ship sailed from Angostura, Venezuela, without a supply of Dr. Siegert's bitters. Samples of the same product are available for clinical trial by writing the J. W. Wupperman Angostura Bitters Agency, Inc., 14 East 46th Street, New York City.

* * *

Infected Wound Therapy: This booklet contains the result of an investigation into the germicidal and stimulative effects of Antiphlogistine. Write: The Denver Chemical Mfg. Co., 163 Varick Street, New York City.

* * *

Disguising Distasteful Drugs: A 16-page booklet, colorfully illustrated, telling how to add

palatability to some oft-used remedies. Write Reed and Carnrick, 155 Van Wagenen Avenue, Jersey City, N. J.

* * *

Crookes' Colloids: A well prepared catalog of colloid preparations of standard drugs, offered to the medical profession only. Write: The Crooke Laboratories, 145 East 57th St., New York.

* * *

La Tribune Medicales: In case you do not already receive it, this is the name of a medical journal published in French, which will be sent monthly through the courtesy of Laboratoire de Pharmacologie, Inc., 92 Beekman St., New York City.

* * *

Adhesive Plaster, Its History, Manufacture and Uses: This 80-page book pictures some uses of adhesive plaster of which you have probably never guessed. Published and distributed by Johnson & Johnson, New Brunswick, N. J.

* * *

Prescott Report on Coffee: A report of a three-year investigation of coffee by Prof Samuel C. Prescott, together with a leaflet on better coffee making, is offered by the Brazilian-American Coffee Promotion Committee, 64 Water Street, New York City.

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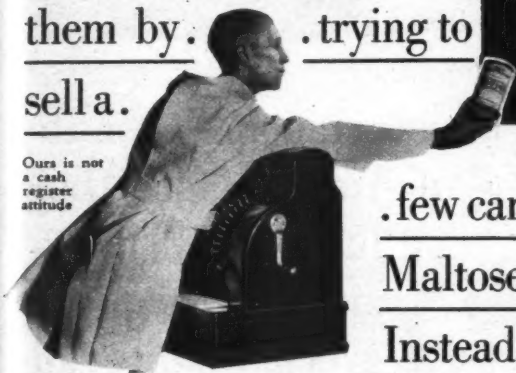


When the Mrs. Smiths of America write to Mead Johnson & Co. for free medical advice—how to feed their babies—do we give it to them by . . . trying to sell a . . .

Ours is not
a cash
register
attitude



We receive thousands of letters from mothers.



. few cans of Dextri-Maltose? *We do not.*

Instead, for years, we have been quietly doing a real job by contacting these women and their babies with the physician—thousands of them every year. Exhibits A, B, C, & D*

COUPON

MEAD JOHNSON & CO., Evansville, Ind., U. S. A.

Gentlemen: I know you don't enclose dosage directions or circulars in your packages of Dextri-Maltose, Acterol, etc. What do you do when the public writes to you for free medical advice, and how does that affect me? I enclose professional card for reply.

M.D.

**available to you, upon request*

clearly demonstrate how we do this. We are, indeed, *independent* of public favor, but we are entirely *dependent*



Mother's information about Dextri-Maltose and how to use it, comes from her physician.

upon your cooperation. When the Mrs. Smiths of America feed their



Nowadays, the public is plagued with a vast amount of gratuitous, meddlesome medical advice.

babies by magazine, newspaper or grocery store advice, the control of your pediatric cases passes out of your hands, Doctor.

COUPON

MEAD JOHNSON & CO., Evansville, Ind., U. S. A.

Please send samples of and B blanks for Dextri-Maltose.

_____ M. D. _____ Street

Town _____ Druggist's Name _____

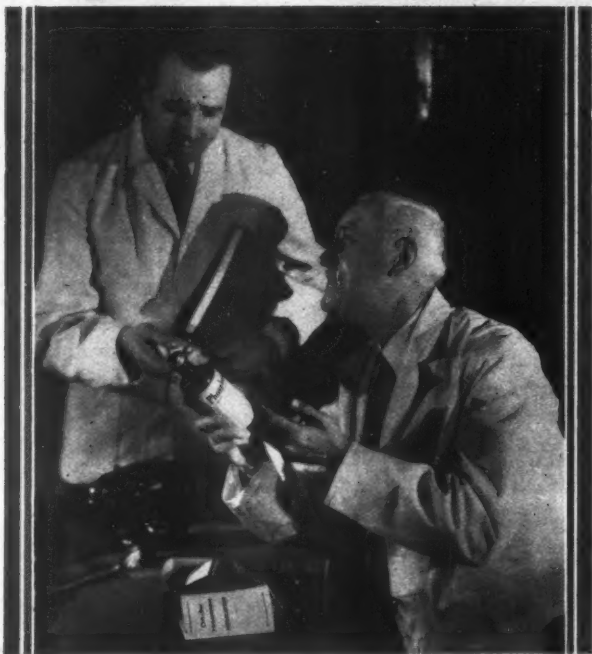
Doctor, to avoid errors, please send professional card



THE photographer was on hand during a recent operation by Dr. Voronoff.

Here are the prize-winners in a pageant of the Sunset Trail Pioneers held in Eugene, Oregon. The costumes are genuine and date back as early as 1849. (Photos by Herbert.)

"Phosphorcin is my standby"



"I've prescribed nothing else for 15 years . . .

for all my Neurotic patients—especially where the cause was due to 'tired' or 'wornout' nerves. Not only in my neuroses, but also as a convalescent and body-building food following operations and febrile diseases—

Phosphorcin



has never failed me. It is one of the best reconstructive and nerve tonics that we have.

"If I were you Doctor Jones, I would be guided by my long clinical experience, and prescribe this dependable preparation at the first opportunity."

.....
ORGANIC PREPARATIONS CO., Ave. Y & E. 16th St., Brooklyn, N. Y.

Kindly send me gratis a sample of PHOSPHORCIN.

..... M. D.

No Sugar

No Alcohol

My Druggist is.....





The Doctor and His Investments

Continued from Page 27

while they only recover their senses slowly and one by one."

A famous multi-millionaire once told me that this book had been more valuable than any other in keeping his perspective, irrespective of prevailing mass psychology.

The October smash took a tremendous amount of inflation out of the stock market. It also carried many standard issues below their intrinsic value, as measured by dividends, earnings, and probable long term prospects. It created many new buying opportunities. It laid the basis for new fortunes for the few, although it impoverished great multitudes of less expert traders.

In giving his formula for making a fortune, one rich financier once pointed out:

"It's easy enough. The simplest thing in the world. I merely did what the public wanted me to do. When they came excitedly clamoring and frantically bidding for stocks which I held, I accommodated them by letting them have my holdings. When they came excitedly clamoring and frantically offering for sale stock which they held, I accommodated them again by purchasing some of their holdings."

In the interest of stabilizing the situation, strong individual and institutional buyers stepped into the breach, serving the country

well and being rewarded, in my opinion, with stocks which, from a long term standpoint, are likely to prove cheap, irrespective of intermediate fluctuations. By the time this article reaches the readers eye, the market may of course be in a new phase.

Shortly before the Wall Street cataclysm, while there was still time to act, a reader in Bing-hampton wrote this:

"Perhaps I am overstepping the bounds of propriety, but I have just run across your name as financial editor of this magazine, and having lost sight of you since you severed your connection with the New York Tribune, and wishing many times that I knew where you were located, I am taking the liberty of writing to you, for I certainly have missed your financial advice in the Tribune.

"I am holding the following stocks and since the market has had a tremendous rise, I wondered if it might not be an opportune time to dispose of same and put the proceeds in bonds:

No. of Shares	Stock	Cost
10	American Power & Light	112
10	Amer. Smelt. & Refining	120
10	Anaconda Copper	105
10	Electric Power & Light	60
10	General Electric	164
33	Inter. Tele. & Telegraph	56
20	National Dairy Products	55

Vapo-Cresolene

EST. 1879

The value of inhalants for the relief of cough is unquestionable. These cresols of coal tar, so strongly antiseptic and soothing, yet harmless as vaporized, have been demonstrating their usefulness for 50 years as a means of relieving cough and difficult breathing, as in whooping-cough, bronchitis, catarrhal croup, bronchial asthma, coryza, cough due to colds, and the bronchial complications of measles.

Treatment is preferably at night when rest is most desired. The antiseptic vapor is given off all night without attention to the vaporizer, thus making it unnecessary to disturb the patient.



VAPO-CRESOLENE CO., 62 Cortlandt Street, New York City
Miles Building, Montreal, Quebec

A Clinical Investigation of FARASTAN

(Mono-Iodo-Cinchophen)

in Arthritis and Allied Conditions

To secure more conclusive evidence as to the actual clinical performance of FARASTAN (Mono-Iodo-Cinchophen) an analysis has been completed of the results obtained in 1517 cases as treated by physicians in all parts of the country.

This supplements and confirms the results in 488 cases previously reported.*

The analysis shows in brief:

Number of Cases	Diagnosis	Improvement Slight to Marked	No Improvement	Discontinued— Lack of Tolerance
709	Arthritis	85%	11%	4%
175	Arthritis Deformans	82%	13%	5%
127	Osteo- Arthritis	80%	12%	8%
287	Neuritis	83%	15%	2%
190	Sciatica	85%	9%	6%
7	Acute Articular Rheumatism	100%	—	—
22	Miscellaneous	90%	10%	—
1517	Recapitulation Averages	84%	12%	4%

*"Mono-Iodo-Cinchophen in the Treatment of Rheumatic Conditions—Reports of cases"—J. G. Ross, M. D., *Medical Review of Reviews*, August 1929.

Write for full size package and literature

The Laboratories of

The FARASTAN COMPANY

137 South 11th Street

Philadelphia, Penna.

15	Paramount Famous Players	
	Lasky	50
12	U. S. Steel	158
15	Union Carbon & Carbide	63
12	Woolworth Co.	77
30	Niagara Hudson Power	25

"I owe the bank about \$3,000 on the above. Inasmuch as I am near 50 years of age and have worked hard to build up this little estate and in case of disability would be dependent on the income therefrom, I wondered whether or not I should sell and go into bonds. The brokers tell me that the stocks are all good and should yield me a larger return over years than bonds. I must confess it is a mystery to me and would appreciate your advice or suggestions."

The foregoing list contains excellent stocks, although the Niagara Hudson Power is purely speculative and, in my opinion, too hazardous for the purpose intended by this particular investor.

In view of the fact that this investor might soon become dependent on the investment fund, it is perhaps risky, especially at this stage of the speculative cy-

cle, to keep all of his resources in even the best grade of common stocks.

With stocks currently yielding far less than high grade bonds, only those who are building an estate for the distant future can afford to keep a large proportion of their funds in common stocks.

Those who like the growing capacity of stocks, but who lack confidence in their ability to choose shares wisely under existing market conditions, can find a way out by buying shares of investment trusts, permitting specialists to invest for them by proxy. The Irving Investors Management Company, the City Bank Farmers Trust Company, and the Brooklyn Trust Company offer uniform trust plans whereby individuals of limited means can merge their capital, and get the benefits of expert and continuous managerial supervision.

The Binghampton reader is not in position to continue the present large commitment in common stocks. He ought to consider immediately placing at least half in good bonds.

The following list is suggested for consideration:

	Price	Current Return	Yield
Chicago Union Station 6½s 1963	115	5.65	5.21
Southern Ry. 6½s 1956	118	5.5	4.84
Bing & Bing Inc. 6½s 1950	92	7.00	7.38
Sao Paulo St. 7s 1956	93¼	7.50	7.75
B. M. T. 6s 1968	92	6.52	6.72
Canadian Northern 6½s 1946	114	5.7	4.88
Great Northern 7s 1936	109	6.42	5.22
City of Budapest 6s 1962	75	8	8.76

Regular investment trusts, such as those affiliated with the American Founders Corporation, the Sterling Securities Corporation, and the Spencer Trask Fund, offer another way out.

The individual, whose estate exceeds \$100,000 can handle his funds independently along scientific lines, by retaining competent investment counsel on a fee basis.

(Turn the Page)

You reach the cough and reconstruct the vitality of the patient in a single effort with

Guia tonic

Liberal amounts for trial sent upon request.

WILLIAM R. WARNER & CO., Inc., 113 W. 18th Street, New York City

To break the back of a long winter . . . a Cunard-Anchor West Indies Cruise



Ten cruises of varying length from 8 to 26 days. An excellent way in which you can economically exchange the depression of winter for sun . . . for gaiety . . . for continental life done up in the golden wrapping of the tropics. Switch your summer vacation to winter and follow the sun! Substitute a charming chintz-hung Cunard stateroom . . . Cunard vacation genius . . . Cunard service, for traffic jams . . . heated rooms . . . subway skirmishes. Invest in the sun via Cunard and draw nerve-relaxing, joy-inspiring dividends for all the rest of the year.

VARIED ITINERARIES INCLUDING

San Juan, Santiago, Santo Domingo, Port-au-Prince, St. Pierre, Fort de France, Barbados, Trinidad, La Guayra, Curacao, Colon, Kingston, Havana, Nassau, Bermuda.

Sailings from Dec. 3, 1929 to April 12, 1930

Minimum rates from \$175 up

See Your Local Agent

CUNARD-ANCHOR WEST INDIES CRUISES

Another way out for individuals who are not yet willing to give up the growing qualities of shares is in the purchase of convertible bonds, which, like bonds, offer a fixed interest return, and which on account of their convertibility into shares assure a stake in the future.

An individual, who requires a good current return, however, will find better yields in straight bonds, which reflect money rates, than in convertible bonds, whose prices also reflect the speculative prospects of common stocks.

Ups and Downs

-a monthly review by the
financial editor

The need of a Federal Reserve policy of restriction has passed, and the outlook is for distinctly easier credit conditions, especially after the holiday period. This indicates that all sound bonds are attractive, and will not definitely be available at prevailing quotations.

With the deflation of stock prices has come a mental deflation also. Since the break, there has been an opportunity to get back to investment first principles. Canny bargain hunters, in making selections, have considered the earnings, assets, dividend return, and near term prospects of corporations, rather than mysterious whisperings by customers' men in brokerage offices and independent tipsters.

Inasmuch as there was no corresponding inflation in seasoned dividend paying railroad stocks, they failed to react commensurately with the decline in highly exploited industrial and public utility shares. At this writing, most railroad stocks seem attractively priced. Of course, after the debacle, numerous public utility and industrial stocks too were selling at or below their intrinsic investment value.

(Turn the Page)

The recurrent intermediate setbacks in stock prices give the discriminating investor opportunities to pick up his favorite stocks at price concessions. After careful analysis, it is advisable to put in buying orders at price levels that seem attractive. The time to have faith in the future of American business is when highly emotional marginal speculators are clamoring to find a buyer.



Everybody's (Cont. from Business Page 23)

factory employees has been wiped out. The man from the office can no longer walk through the shop and feel superior to the fellow in overalls. Young men who sought to avoid hard manual work have discovered that the fellow with the trade is not only the one who is getting the best pay, but is often the individual being sought for the jobs higher up. An army of employee-owners in nearly every large organization has largely done away with strikes.

We have become sanitation-minded, machine-minded, motor-minded, and thing-minded generally. As a result of having become a nation of mechanics, it has been possible to effect an increase of 276 per cent in wages in the face of a 10 per cent decrease in the average number of hours of work by all of our unionized trades. We are cleaner and keep more fit than our forefathers, as is attested by the large increase in the number of dentists, barbers, manicurists and hair-dressers.

Our intellectuals marry late and have few descendants. Political parties today follow opinion instead of leading it. Business recognizes the existence of a politician class, but does not let this group handle anything vital. Public opinion is now propagated almost entirely by societies, and the legislator is a poor-

PRESCRIBE



"BROMO CAFFEINE" FOR

NERVOUS HEADACHES

Free from Coal Tar Heart Depressants. Used by Physicians Everywhere. Simple, Effective and Harmless.

Write for free supply
U.S.P. Litmus Paper

**KEASBEY & MATTISON
COMPANY**

Ambler, Penna.

Why Milk of Magnesia with Petrolagar

IT is widely and successfully used in the management of gastric conditions due to hyperacidity accompanied by constipation.

Petrolagar-with Milk of Magnesia (green label) has a prolonged neutralization effect, a low exciting power, if not an inhibitory action on the production of HCL.

A combination most acceptable to internists. Some have reported a marked reduction in the dosage of alkalies, otherwise required to bring about neutralization.

Petrolagar-with Milk of Magnesia has a soothing and alleviating effect on granulation tissue or ulcer surface.

Also for general purposes as a laxative, Petrolagar-with Milk of Magnesia (green label) is preferred by many practitioners because of its increased activity over Petrolagar-Plain. This is due to the presence of milk of magnesia, 8 per cent.

For the convenience of the physician in the treatment of various conditions accompanying constipation, Petrolagar is issued in four types. Petrolagar-with Milk of Magnesia is identified by the number "3" and bears a green label.

Petrolagar Laboratories, Inc.

536 Lake Shore Drive, Chicago

Dept. M.E. 11

ly paid slave of this manufactured opinion.

We have been gobbled up by rampant materialism, disillusionment and cynicism. The literary vogue is to discuss gangsters, prostitutes and pugilists. The cultural trend is toward a fondness for life in the raw. We sit at the feet of the hobo, the bruiser, and the criminal.

Since putting on clothes of purple, our mental appetite has become so jaded that in order to get a "kick" out of life, we find it necessary to turn to the primitive. A pampered people can only be stirred by tales of discomfort, pain and peril. The public wants knock-outs—not boxing.

We no longer make voyages, but only flights. We attempt to cheat fate by living several times in a lifetime. The city dweller instead of making a ceremonial departure for the country when warm weather comes, now spends a month at the seashore, another in the mountains, three weeks on the Riviera and an equal period of time motoring about Europe—four vacations instead of one. Remaining in one place now quickly produces a fever in Mr. Citizen, that can only be cured by speed.

Lovers telephone or telegraph to save the time and labor spent in writing letters. Literary style has become telegraphic. Brevity is the prime virtue. Few people can any longer distinguish between going fast and going as fast as possible.

Now the sole aim is to establish a new record. We have cast aside the leisurely implements of old. The rule of always making hasty contacts with everything has played havoc with our perceptions.

We have the radio instead of the ballyhoo man; the taxicab instead of the snowdrift; nightclub melodies instead of the home-brew music of the parlor quartet.

Most newspaper and magazine articles signed by famous people are the products of the "ghost" writer furnished by the syndicate which sells the stuff. Thousands of men of prominence now have a hidden literary light serving them. The keen desire of the public to read opinions which emanate from the great and the neargreat has made "ghost writing" a real profession and a fairly lucrative one.

The cigarette, once considered a coffin nail, has now climbed high on the social ladder and is even more respectable than was snuff two centuries ago. Tobacco shops in New York City outnumber all other stores except the grocery. Consumption of cigarettes is at the rate of a thousand a year for every man, woman and child in America. Laid end to end this huge tonnage would form 50 connecting lines between the earth and the moon.

Nearly half of the women living in large cities have taken up smoking. Women's colleges are providing special smoking rooms for the students. The rapid growth of this habit probably

Eventually! you will prescribe NEO-REARGON

FOR EVERY GONORRHEA CASE

Results are Prompt, Dependable, Lasting.

Write for Literature and Technique.

AKATOS, INC.

114 Liberty Street, New York

Fingers find it feasible

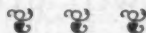
to write a prescription calling for combined
Lubricant, Laxative and Antacid action.

Magnesia-Mineral Oil (25) **HALEY**

Accepted for N.N.R. by the A. M. A. Council on
Pharmacy and Chemistry

Formerly HALEY'S M-O Magnesia Oil

is a uniform, permanent, palatable, unflavored
emulsion of Milk of Magnesia and Mineral Oil
which has proved its practical efficiency in
gastro-intestinal hyperacidity,
gastric and duodenal ulcer, in-
testinal stasis, autotoxemia,
constipation, colitis, hemor-
rhoids. Also before and after
operation, during pregnancy
and maternity, in infancy,
childhood, old age and con-
valescence.



Each tablespoon-
ful contains:
Milk of Magnesia
(U.S.P.) 3iii
Liq. Petrolatum
(U.S.P.) 5i

Generous sample and literature on request.

THE HALEY M-O CO.
Geneva, N. Y.

represents the outstanding social phenomenon of this era. It is quite a change from 30 years ago when a cigarette between the lips of a woman was regarded as a badge of questionable character.

Revolutionary changes in thought and practice are on every side. Compare the modest advertisements of the early days with the flamboyant copy of our present "go-getters." Aside from pursuing his own aggressive sales methods, the individual in business today belongs to various societies that flood the press and bombard the public with propaganda so cleverly disguised that it fools even the sophisticate.

Crafty suggestions lurk in the modern advertising text like trout hidden in a pool. The typewriter the hero uses, the magazine that appears in the hands of the leading actor, the story on proper interior decoration, the article which explains how to be well dressed on \$28.90 a month, and the nation-wide contest to decide whose baby is most beautiful are all likely to be carefully designed attacks on the pocketbooks of unwary consumers.

It is an age for caution. Trades disappear over night. Corporation reports may have their net balance transformed from black to red in the course of a few months. Only a short

time ago people lived mostly in houses. Now apartments take care of more than half of our urban population. Taking American cities as a whole, the proportion of people living in apartments increased from 24.4 per cent in 1921 to 53.7 per cent at present. This change has proved of great importance to the business of many industries.

The success of the "talkies" has brought many musicians to face the necessity of finding new ways to earn a livelihood. Twenty years ago the members of this trade were receiving an average of \$15 a week. Then came the amazing development of the motion picture which created nearly 15,000 movie houses in the United States, practically all of them employing from 2 to 100 musicians. This quickly boosted the wage scale of the players until those in the big metropolitan houses were getting \$80 a week.

Then came a "talkie" featuring Al Jolson. It cost less than \$50,000 to produce, and yielded a gross income of \$1,500,000—an amazing success. Workmen are now busy day and night equipping theaters for sound movies. Many prophesy that within three years the entire motion picture industry will have been revamped, giving us only canned orchestral accompaniments. All

"According to Guttman (See U. S. Dispensary 1926, page 388) one part of creosote in three thousand completely inhibits the growth of bacteria," hence its value in the treatment of

TUBERCULOSIS

As it retards the progress of the disease, prolongs the life of the patient and aids in final recovery.

Mistura Creosote Comp.

(KILLGORE'S)

Meets all the requirements of the creosote treatment

Sample and literature on request

CHARLES KILLGORE

55 West Third Street,

New York

THE COMFORT DERIVED

from washing the nasal tract with ALKALOL during head colds, can only be appreciated through personal use. Even if you haven't a head cold we request that you give it a personal test, for used on the delicate membrane of the eyes, as a drop, bath or compress; in the nose as a spray or douche, it promptly displays marked cleansing and soothing properties that will suggest it in conditions requiring similar treatment.

To make it easy for you to try, we will send a liberal quantity, or if you are already acquainted we are as pleased to send.

The
ALKALOL
Co.
TAUNTON
MASS.

.....Mail the Coupon.....
M.E.-N.

ALKALOL COMPANY,
Taunton, Mass.

Gentlemen: Please send samples of
ALKALOL.

Address.....

Dr.....

the melodies will be manufactured through the use of a few groups of artists employed in great international music-canning plants built for mass production.

It is the same old story of the machine versus the individual. A few years ago the telegraphers were in the same position that the musicians are today. Each message was sent and received by a worker at an instrument. Now everything is dispatched and received by automatic printers. Two telegraphers with their electric typewriters now do the work that was done by 20.

It is foolish to shed tears over the passing of the good old pre-mechanistic days. We are coming of age. The speed of change will be faster—not slower. We are extravagant, speed crazy and so easily duped that swindlers collect from us annually nearly a billion dollars of hard-earned cash.

The long-time trend of civilization is definitely upward, and this forward march to higher levels of living never halts except momentarily when human nature runs riot and necessity arises for a drastic readjustment of ideas and practices.

The chief threat to our present safety and happiness is the same old tendency of people to become soft-headed, gullible and blind to the importance of the human-nature factor.

All news is now good news, caution has lost its value and surmise has supplanted fact. On every side is loose talk and hasty opinion. The moving motive is to get while the getting's good, without any consideration being given to one's responsibilities for actions that add difficulties to the future course of business. There is no certainty that we will not have to retrace our steps and revise our opinions in many places where new theories have been substituted for old principles.

We are still wasting resources, pursuing absurd practices and making such ridiculous mistakes

WHEN the heart has been weakened from prolonged overwork and strain,

CACTINA PILLETS

A Preparation of the Mexican Night Blooming Cereus

may be safely and effectively prescribed.

Thus employed, Cactina gradually improves the nutrition and tone of the heart muscle, restores the cardiac rhythm and renders the heart more resistant to irritating influences. Cactina is a true cardiac tonic without cumulative effect.

Samples to Physicians Only

Gentlemen:

Please send me a professional sample of CACTINA PILLETS.

Dr.

Address

Sultan Drug Company
St. Louis, Missouri

When calcium given intravenously is desirable as in many cases of tuberculosis (pulmonary, bone and intestinal); in certain cases of asthma and in indolent ulcerous conditions—then

Calcium-Glucosan

(BREON)

Is Appreciated

In this preparation with a greater margin of tolerance, calcium can be administered to about twice the amount per dose possible with calcium in other forms.

Calcium-Glucosan (Breon) is an anhydrous dextrose combined with calcium hydroxide in a definite chemical compound. It is prepared in 30 cc. vials with rubber stoppers. Each vial contains a sterile solution equivalent in calcium content to calcium chloride, 2 grams.

Supplied in boxes of 6 and boxes of 25 vials from any of the offices listed below.

GEORGE A. BREON & CO., Inc.

KANSAS CITY, MISSOURI

NEW YORK CITY
319 W. 50th St.

ATLANTA
405 Rhodes Bldg.

CHICAGO
1018 S. Wabash

SAN FRANCISCO
604 Mission St.

LOS ANGELES
1929 Hillhurst

Just mail this coupon to the nearest Breon office.

GEORGE A. BREON & CO., Inc.

Send me more information about Calcium-Glucosan (Breon).

M.D.

Address

in judgment that one is prone to question the intelligence of our people. But our alliance with science and research has raised American life to the highest social and economic level ever attained in human history. Our recent accomplishments make up a story of conquest of more heroic proportions than any ever before recorded, and the end is not yet.

Medical "Castes" of India

Continued from Page 12

able number of unofficial institutions which grant diplomas which are not recognized, and during the last generation a great evil has sprung up through medical diplomas being granted by unauthorized bodies. The bogus European and American "Universities" and "diploma mills" have found a ready market for their wares in India, and under the new Medical Registration Acts which have been in existence for less than twenty years many practitioners with queer diplomas have managed to find their way on to the Registers.

The medical hierarchy of India is divided into four watertight compartments:

(1) The commissioned and non-commissioned Military Medical Services, (2) the Superior and Subordinate Civil Government Medical Services, (3) the Independent Practitioners and the women doctors, and (4) the "Adherents" to the Ancient Systems of Practice.

1. *The Commissioned and Non-Commissioned Military Medical Services:*

There are two commissioned medical services working side by side in India. The medical care of the British Army is in the hands of the Royal Army Medical Corps whose Officers are of unmixed European blood and serve all over the world. In India, in addition to their military

Cystogen

Have You Prescribed
CYSTOGEN
for Relieving
INTERNAL
DISORDERS?

CYSTOGEN rids the system of toxins and waste products and circulates an antiseptic substance throughout the body. CYSTOGEN clarifies cloudy urine, and clears up infected conditions of the bladder, urethra, pelvis of the kidney, ureter, prostate and seminal vesicles.

Thus CYSTOGEN can be prescribed with confidence for infections of the urinary tract. Physicians have come to recognize CYSTOGEN as the safe and un-irritating urinary antiseptic.

CYSTOGEN-LITHIA
CYSTOGEN-APERIENT
CYSTOGEN TABLETS

*The coupon will bring you
complete literature with
samples.*

Cystogen Chemical Co.
220—36th St., Brooklyn, N. Y.

Please send me professional
samples of CYSTOGEN.

Dr.

Address

City and State

Druggist's name

M.E. 11-29

Bismuth Intravenously

LOESER'S INTRAVENOUS SOLUTION OF BISMUTH

A standardized sterile, stable solution in hermetically sealed Jena glass ampoules ready to inject. 5c.c. represent 15 Mg. of metallic Bismuth as the tartrate. Controlled by biologic tests.

Another Loeser Achievement



Despite the failure of many investigators and the repeated adverse statements in the literature, we have succeeded in making the intravenous injection of Bismuth practical, safe and effective. Lesions heal rapidly following a series of injections administered three times a week.

On account of the freedom from reaction, the safety and simplicity of the technic, it is not alone of value to the specialist but particularly adapted for the general practitioner who cannot afford to have serious reactions occur in his office. \$3.00 per box of 6 ampoules.

*If you are unable to obtain from your dealer,
mail or wire your order direct to*

Loeser Laboratory

22 West 26th Street

New York, N. Y.

duties, they are employed in a number of civil and quasi-civil appointments.

There is, for example, a military hospital for women and children in each "station" which is placed in charge of an Officer with special knowledge. In addition another army doctor is selected for attendance on officers and their wives and families. He is styled Staff surgeon, paid an extra allowance, and placed in charge of what might be called the best of the general practice of the towns which have grown up round the barracks.

With that amazing disregard for economics which sometimes characterizes Western administration, the Indian troops which serve alongside their British comrades are looked after by an entirely different body of doctors, called the Indian Medical Service.

Nearly a century ago this formation commenced as a purely European Service, but Indians have been admitted for the past forty years and they have gradually attained to a large percentage of its personnel. The "I. M. S.V., as this Medical Corps is usually called, is unlike any other military unit, in that about half of its members are permanently in civil employment. It has charge of the Special Military Hospitals for Indians and shares medical staff appointments equally with the British Service.

The Officers in military employment are under the adminis-

tration of the heads of the Military Medical Services, who may be either R.A.M.C. or I.M.S., but in this curious body military duty is regarded merely as a stepping stone to civil practice.

Closely allied to the commissioned doctors is a large body of non-commissioned officers known as the Indian Medical Department. This Department consists of two grades, viz. (i) the Military Assistant Surgeons and (ii) Military Sub-Assistant Surgeons. (i) *Military Assistant Surgeons*

The Military Assistant Surgeons class is recruited from that relic of early European traders, the domiciled Anglo-Indian (i. e. Eurasian) population, i. e. persons of European descent permanently resident in India.

The young fellows are styled "medical pupils", housed and clothed from the public purse and receive a small monthly stipend. They go through a curriculum of four years at one of the *Colleges* and on passing their final examination they are gazetted to a similar rank to that held by sergeant majors and band-masters.

In return for their free medical training, the Government insists on at least seven years' service before they can take their discharge, or a refund of a portion of the money spent on their training. Although educated at one of the Colleges these men do not qualify for a University degree or diploma, but are merely required to pass the Licentiate examination of either the State

Physicians are finding that—

K-D KONES

are not only a reliable Vaginal Antiseptic and Prophylactic, but an efficient Deodorant.

K-D KONES are Vaginal Suppositories with Chlorine the active principle in a neutral soap-like base.

The Clinical Laboratories Co. ME 11
8 West 40th St., New York, N. Y.

Please send me a package of K-D
Kones for free clinical trial.

Dr.

I would like to have K-D KONES
stocked by

Druggist's Name

Address

A Good *Emplastrum*

When a local application is needed, a good
emplastrum is

Numotizine

and the formula defines the field of
usefulness.

FORMULA

Guaiacol 2.6	Formalin 2.6
Creosote 13.02	Quinine 2.6
Methyl Salicylate 2.6	
Glycerine and Aluminum	
Silicate, qs. 1000 parts	

Easily applied—heat to body temperature—
economical—a thin application serves satisfactor-
ily—gets results without blistering, discomfort or
gastric disturbances.

Safe—easily removed when the desired effects
are obtained.

NUMOTIZINE, Inc.

(Dept. M.E. 11)

220. W. Ontario Street,

Chicago, Ill.

Medical Faculty at Calcutta, the college of Physicians and Surgeons at Bombay or the State Board of Examiners at Madras.

Military Assistant Surgeons were formerly called Apothecaries and they correspond to the Surgeon's Mates of the days of Smollett. They are recruited for duty with British troops and in British Military Hospitals carry out most of the minor medical work under the orders of the commissioned officers. In addition, they act as assistant house surgeons, dressers, compounders, stewards, ward masters, and quarter masters. Their scope for professional advancement is not great in the military hospitals, so that they all seek civil employment.

Like the commissioned I. M. S. nearly half of the members of the subordinate service are in civil employment, where they form a war reserve. In civil work the military assistant surgeons act either as civil surgeons in the less important stations, as assistant to the civil surgeon in the larger stations, as second in command of laboratories, and in a great variety of the lesser government medical posts.

(ii) Military Sub-Assistant Surgeons

These men were known as "Hospital Assistants." They are recruited by the Principals of the Medical Schools at Agra, Lahore, Madras, Poona and Ahmedabad, from Indian youths who have passed a matriculation or similar educational test. They are enrolled under the Indian Army Acts and during their medical training are under military law. They are educated free and receive a small salary from the beginning of their training. They get a four years'

SNUGFIT EYE PATCH

Six styles. Freedom of movement as holds a dressing.

SNUGFIT SURGICAL BIBS

Soft cream colored oiled silk. Better than rubber. Send post card for information to:

THE SNUGFIT EYE PATCH CO.
Lansing, Mich.

Don't Rub!

JUST apply BETUL-OL to the painful area. It penetrates without need of rubbing and quickly RELIEVES CONGESTION in Rheumatism, Neuritis, Sprains, Muscular Stiffness, and whenever a good analgesic is indicated.

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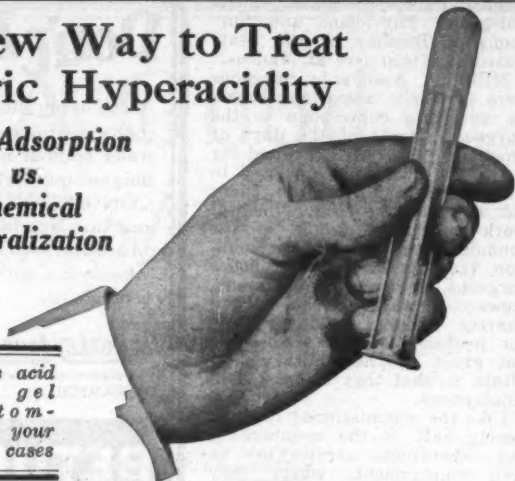
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course, and like the Apothecaries must pass the examination of one of the Indian licensing bodies qualifying them for registration.

Similarly they must sign on for seven years, and are posted to Indian military hospitals where they perform for Indian troops exactly similar duties to those performed for British troops by their Anglo-Indian compeers—the military assistant surgeons.

Like them they are eligible for civil employment, in which they occupy a variety of less important professional posts.

2. *The Civil Medical Service*

The Superior and Subordinate Civil Medical Services are under the control of the Director General of the Indian Medical Service who is the Surgeon General with the Supreme Government, and of course a senior army doctor.

Each Province or administrative area throughout the Indian Empire has a certain number of I.M.S. officers in civil employ-

ment. At their head is an administrative officer styled "Surgeon General with the Government" in Bengal, Bombay and Madras, and "Inspector General of Civil Hospitals" in all the other provinces.

The "Surgeon General", or "Inspector General" is the adviser of his Government on all medical matters connected with his Province. He is responsible for the supervision of all medical institutions; and also for the direction of the provincial medical colleges and schools. He has control of the entire civil medical staff and arranges for its recruitment, transfers and promotion.

The various Provinces are divided into districts and at each district headquarters is a "civil surgeon" who gets the cream of the medical and surgical practice and has under him a civil assistant surgeon and one or more civil sub-assistant surgeons who get the crumbs that fall from the rich man's table.

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There are circumstances under which the use of fountain syringe or vaginal douche is neither convenient nor effective. Yet, with existing vaginal hypersecretion or leucorrhoea, vaginal irritation, subacute or chronic inflammation, ulceration or relaxation of tissue, the action of astringent, decongestive, antiphlogistic and soothing medicaments is indicated.

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Up till quite lately, professional appointments in the Medical Colleges and practically all important civil surgeoncies were a monopoly of the European military medical officers, but Indian Army Surgeons, civil assistant surgeons, and Indian private practitioners with British qualifications, are obtaining these appointments in larger numbers every year. The minor civil surgeoncies are, as we have seen, held by civil and military assistant surgeons.

Much, in fact, most of the civil work is done by two classes of Government officers who correspond in the civil medical services with the military assistant Surgeons and sub-assistant Surgeons of the Indian Medical Department, which the writer would like to emphasize is *primarily a military body* like the Royal Army Medical Corps. The subordinate civil medical officers are styled (a) Civil Assistant Surgeons, and (b) Civil Sub-Assistant Surgeons.

(a) The civil assistant surgeon branch is open to all classes of Indians, Europeans, and Anglo-Indians, but there have been but few candidates among the latter two classes in late years. They are recruited from the graduates (M. B.) or diplomates (L.M.S.) of one of the Indian Universities. On permanent appointment these doctors execute a bond to serve the civil Government for five years, or in default to pay a fine of Rs. 500.

They are not bound to serve

with troops. A certain number of the first-class civil surgeoncies are reserved for these doctors, and many hold minor civil surgeoncies. Some are employed as lecturers at the medical schools, as demonstrators and assistant professors in the colleges, and in charge of hospitals at headquarter stations and the larger rural dispensaries. In addition they hold various railway appointments and posts as medical inspectors of schools. The appointments for house physician and house surgeon in the large Indian hospitals are not held by junior practitioners, gaining experience as in Europe and America, but by members of this class or military assistant surgeons in civil employment.

(b) The civil sub-assistant surgeon branch is recruited from the provincial medical schools. A considerable number of students of these schools receive Government scholarships or bursaries from local provincial funds during their training, but most defray their own expenses. The Government selects what are considered to be the best men as they pass out of each school to fill vacancies or fresh appointments on the temporary civil lists.

After a long or short period of temporary work these Indian Medicoes are given permanent employment. When permanently engaged they sign on for service under the Provincial Government for five years, and undertake if

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necessity arises to serve with troops in any part of India.

There are upwards of five thousand of these men holding permanent or temporary appointments in India. They are placed in charge of police, serve in jails, lunatic asylums and railway hospitals; and hold a vast variety of minor medical appointments under their local governments. Indeed, these men carry out the bulk of medical practice among the poorer classes throughout the entire Peninsula.

3. The Independent Practitioners

This body numerically far outnumbers the doctors in civil and military Government employment. It is mainly made up of graduates and licentiates of the Indian Universities, medical missionaries, diplomates of the official and unofficial medical schools, retired civil and military assistant Surgeons and sub-assistant surgeons, failed students of the medical colleges and schools, and a host of unqualified persons who practice allopathic medicine. There are also many Indians who have gone through a complete curriculum in the United Kingdom or America and obtained degrees or diplomas of the highest standing.

A number of these gentlemen have held good appointments in Great Britain and they are gradually replacing the military medical officers on the teaching staffs of the Indian Medical Colleges.

The number of Europeans practising independently is not

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great. They are chiefly to be found in Calcutta, Bombay and Madras. Indeed the shortage of white doctors is so great that the railways, various manufacturing companies, and tea gardens have been obliged to organize Medical Services of their own, and employ a large number of medical men imported from Europe and America. The Mission Hospitals loom largest on the medical horizon in India. There are more than 400 male and female medical graduates (mostly American) engaged as missionaries, and the Salvation Army has a small medical corps of its own.

Homeopathy is quite popular in India. Some of the homeopathy practitioners have obtained proper qualifications, but most of them have no qualification at all.

The average man of the independent medical profession in India is a long way behind the standard of his British or American confrere.

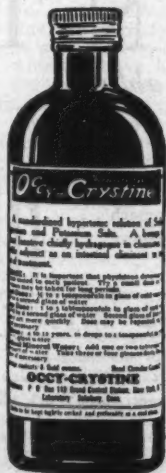
There is an increasing tendency for Indian women to take up medicine as a profession.

At the present time, there are women students in all the medical colleges and medical schools in India, and they come off well as compared with male students in their training in midwifery and diseases of women and children, with the result that after finishing their curriculum each one has what the male Indian doctor generally lacks, a decent training in midwifery and diseases of women.

There is a large demand for women doctors throughout the country, chiefly from public bodies such as municipalities and district boards.

At present, there are not many Government appointments for them, but there is a considerable number of posts in the larger provincial hospitals, under municipal bodies, and in the special Zenana Hospitals for "purdah" or veiled women.

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men's Medical Service for India" is not a State Service but is included in the "National Association for Supplying Female Medical Aid to the Women of India," generally known as the "Countess of Dufferin's Fund," and is administered by the Council of that fund.

The Government of India allots a considerable sum annually towards the maintenance of this service and the Council is largely composed of Government nominees. Recruitment of women doctors for the Service is made both in India and in Europe.

4. *The Adherents to the Ancient Systems of Medicine:*

So far we have seen that the medical profession in India has at its head a military hierarchy with army doctors holding the professorial chairs in the Medical Colleges, acting as "civil surgeons," i.e. leading general practitioners, in the best cities; and last, but not least, with a military surgeon functioning as High Priest of the Civil Medical Service.

But this is not all. Medical Colleges and Schools teaching medicine and surgery as they are taught and practised in Europe and America have been flourishing for more than a hundred years, yet at the present moment the practitioners of Western Medicine are hopelessly outnumbered by the mystics referred to in the opening paragraphs.

I have difficulty in finding a word to describe them; the term "practitioner" scarcely fits. So I have used the term "adherent", as it applies more fittingly to men who reject modern therapeutics and pin their faith to the teaching of the ancients.

When Western Medicine came to India it found two indigenous

"systems" supplying the natives with medical and surgical treatment.

In a country sharply divided on religious grounds, as might be expected, one of these systems was associated with the Hindu, and the other with the Moslem faith.

The Hindu variety is known as the "Ayurvedic System" and is derived from great religious teachers, such as Churaka and Sushruta, who were contemporaries of Buddha.

The Unani System is a bit more modern. It is the doctrines of the Arabic physicians and is about contemporary with Mahomet. It was brought to India by the Moslem invaders and has remained very much as it was taught in the twelfth century.

The essential difference between these "Ancient Systems" and modern medicine is that while we endeavour, with the aid of the allied sciences, to form a physical diagnosis, the Oriental concerns himself with what he calls internal "humours", not unlike the "vapours" which were fashionable in the days of our great grandmothers.

In the words of the leading article of a Burmese medical journal: "Western medical science ascribes the causes of malaria, plague, Kala Azar, Elephantiasis and such other diseases to mosquitoes, flies, bugs, etc., but the followers of the Ayurvedic System refuse to believe these theories and ascribe the causes of the disease to certain internal derangements called "Tridoshas." (Burma Medical Times, April 1928).

When we find such bosh as this being seriously stated in a reputable medical journal, it is surprising enough, but what will

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the American reader think of the fact that the revival of these precious "systems" is made a "plank" in the nationalist movement and that the various Provincial Governments support the revival?

Good money is being spent in establishing schools for perpetuating both Ayurvedic and Unani, and although at present the various Medical Registration Acts only concern themselves with practitioners of Western Medicine in a land of anomalies like India, who knows what the future may bring forth?

The argument for the revival of these systems is a purely economic one.

In fact here lies the crux of the situation!

India is a poor country and most of its teeming millions simply cannot afford to pay the prices which imported remedies and a long curriculum must command.

The average peasant must either go to a hospital—which he doesn't like—or be content with the mystic who supplies him with cheap indigenous drugs.

This need not, however, discourage the doctor who has "heard the East a callin!" White doctors are still very scarce and in great demand.

Out of India's 320 millions although the vast majority are poor, there are millions of others, especially in the great cities, who are well able, and more than willing to make the life of the American doctor in India a good economic proposition.

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A Suggestion for Philanthropists

Continued from Page 59

because of their ability to convey knowledge and to educate men to be good practitioners. Ability as a research worker, in the presence of inability to teach, should constitute no recommendation for faculty appointment. The attributes of a good research worker and real ability for teaching are seldom combined in the same individual. A good teaching faculty would seldom possess even mediocre ability for research.

This constitutes one important reason why there is need for separation of the two types of institutions. Another reason is that undergraduate students should not be befuddled by the problems involved in research. If his time is taken up and his mind filled with abstract technical research, he is deprived of a proportionate amount of practical instruction that he will need when called upon to attend his first patient.

He must not be engaged in a smattering of research work while in medical school, if to be so means that he must work harder after graduation to pick up fundamental points of practical knowledge by himself.

In conclusion: practicing physicians have certain obvious duties, and medical research would be very slow if left for their attention. Medical colleges have uses for their funds and talent that must not be neglected.

Wholesaling present-day treatment is not advancing medical science, and to build big institutions to treat thousands of cases would seem to mean eventual harm rather than good.

Yet medical research must be carried on, and it will require millions. Why not let it be organized upon a non-profit basis with the help of philanthropists, who are now allowing their power to be guided in the wrong direction?

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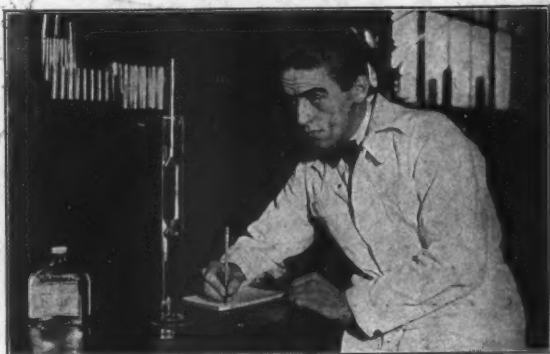
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